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# ANNUAL REPORT

OF THE

## MEDICAL OFFICER OF HEALTH

### For the Year 1946

CYRIL BANKS,

M.D., B.S.(LOND.), D.P.H.(SHEFF.),  
MEDICAL OFFICER OF HEALTH.

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## HEALTH COMMITTEE MEMBERS

1946 (mid-year)

LORD MAYOR :—ALDERMAN EDMUND GREAVES UNDERWOOD, J.P.

*Chairman* :—ALDERMAN ERNEST PURSER.

*Vice-Chairman* :—COUNCILLOR (MISS) GLEN-BOTT, J.P., M.B., B.S.,  
F.R.C.O.G.

ALDERMAN H. BOWLES, J.P.	COUNCILLOR H. O. EMMONY
„ E. A. BRADDOCK, J.P.	„ (Mrs.) B. HAZARD
„ W. CRANE, J.P.	„ (Mrs.) S. JAMES
„ R. SHAW, J.P.	„ J. E. MITCHELL
„ W. SHARP	„ A. E. SAVAGE
COUNCILLOR R. ARBON	„ P. J. TURNER
„ (Mrs.) L. E. CHAMBERS	„ (Mrs.) M. E. WOOD

### SUB-COMMITTEES

#### ISOLATION HOSPITAL AND CITY HOSPITAL.

CHAIRMAN	COUNCILLOR MRS. CHAMBERS
VICE-CHAIRMAN	„ EMMONY
ALDERMAN BRADDOCK	„ MRS. HAZARD
„ CRANE	„ MRS. JAMES
„ SHAW	„ MITCHELL
COUNCILLOR ARBON	„ P. J. TURNER
	„ MRS. WOOD

The Chairman of this Sub-Committee is Alderman R. Shaw, and the Vice-Chairman, Councillor Emmony.

#### TUBERCULOSIS.

CHAIRMAN	ALDERMAN SHARP
VICE-CHAIRMAN	COUNCILLOR MRS. CHAMBERS
ALDERMAN BRADDOCK	„ SAVAGE
„ CRANE	„ MRS. WOOD

#### VENEREAL DISEASES.

CHAIRMAN	COUNCILLOR MRS. CHAMBERS
VICE-CHAIRMAN	„ MRS. JAMES
ALDERMAN SHARP	„ MRS. HAZARD
COUNCILLOR ARBON	„ TURNER

#### MATERNITY AND CHILD WELFARE.

CHAIRMAN	COUNCILLOR MRS. CHAMBERS
VICE-CHAIRMAN	„ MRS. HAZARD
ALDERMAN CRANE	„ MRS. JAMES
COUNCILLOR ARBON	„ MRS. WOOD

#### *Co-opted Members :*

MISS W. GIBSON	MRS. A. CLARK
MRS. M. MARSDEN	MRS. L. SANSOM

#### OFFENSIVE TRADES.

CHAIRMAN	ALDERMAN SHARP
VICE-CHAIRMAN	COUNCILLOR EMMONY

#### BLIND PERSONS.

CHAIRMAN	ALDERMAN SHARP
VICE-CHAIRMAN	COUNCILLOR EMMONY

#### *Co-opted Members :*

MR. A. C. V. THOMAS	MR. W. EDEN
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## HEALTH DEPARTMENT STAFF, 1946.

### MEDICAL.

#### *Medical Officer of Health—*

CYRIL BANKS, M.D., B.S.(Lond.), D.P.H.(Sheff.).

#### *Deputy Medical Officer of Health—*

WILLIAM DODD, M.D., Ch.B., M.R.C.P. (Lond.), M.R.C.S.,  
D.P.H. (from 13.11.46).

#### *Tuberculosis Officer—*

JOHN V. WHITAKER, M.B., Ch.B.(Leeds), D.T.M. & H.(Camb.),  
D.P.H.

#### *Assistant Tuberculosis Officer—*

FREDK. H. W. TOZER, M.D., B.S.(Lond.), M.R.C.P.(Lond.).

#### *Director, Chest Radiography Unit—*

A. E. BEYNON, M.R.C.S., L.R.C.P.

#### *Senior Medical Officer, Maternity and Child Welfare—*

ISABELLA MC D. HARKNESS, M.B., Ch.B., D.P.H.

#### *Medical Staff, Maternity and Child Welfare—*

HENRIETTA MARY MACLEOD, M.B., B.S.(Lond.).

ISABELLA M. O. ALLAN, M.A., M.B., Ch.B., D.P.H.

FREDA M. CHALKLEY, M.R.C.S., L.R.C.P.

MARY S. JOLLY, B.Sc., M.B., Ch.B. (from 16.9.46).

HARRIETT J. GRANT, M.B., Ch.B.

BERNARD R. B. TRUMAN, B.A., M.B., Ch.B. (Part time).

(to 31.8.46).

ETHEL LANDON, M.B., Ch.B. (Part time)

(to 31.8.46).

MARJORIE A. SCOTT, M.R.C.S., L.R.C.P. (Part time).

(to 30.4.46).

#### *Venereal Diseases—*

R. MARINKOVITCH, M.D., Ch.B. (*Director*).

D. B. MILNE, L.R.C.P. & S.(Edin.). (from 18.11.46).

A. D. FRASER, M.D., D.P.H. (Part time).

ETHEL M. D. N. BAKER, M.D. (Part time).

DOROTHEA J. MANN, B.A., M.D. (Part time).

#### *Bacteriologist—*

ELLIOTT J. STORER, M.R.C.S., L.R.C.P.

#### *Ultra Violet Ray Clinic—*

H. N. JAFFE, M.B., B.S. (Part time).

SOPHIA K. G. STUART, M.A., M.B., Ch.B. (Part time).

#### *Skin Clinic—*

A. D. FRAZER, M.D., D.P.H. (Part time).

#### *Diphtheria Immunization—*

A. H. BOOTH, M.B., B.S., D.T.M. & H., D.O.M.S. (Part time).

(To 31.8.46).

F. FRANK, M.D., M.R.C.S., L.R.C.P. (Part time). From 3.7.46).

#### *Relief Districts—12 MEDICAL OFFICERS. (Part time).*

#### *Public Vaccinators—5 MEDICAL OFFICERS. (Part time).*

**NON-MEDICAL.***Chief Sanitary Inspector—*

ALFRED WADE, F.R.San.I.

*Deputy Chief Sanitary Inspector—*

J. N. HUGHES, M.R.San.I.

*Senior Inspector of Meat and other foods—*

F. RICHARDSON, Cert.R.San.I.

*Superintendent Health Visitor—*

MISS M. BEATTY, S.R.N., S.C.M., H.V.

*Assistant Supervisors of Midwives—*

MISS S. M. HOWARD, S.R.N., S.C.M.

MISS D. BACKHOUSE, S.R.N., S.C.M., H.V., R.F.N.

*Ophthalmic Nurse—*

MISS W. E. HAYNES, S.R.N., S.C.M.

*Chief Almoner—*

MISS M. E. M. BENHAM, A.M.I.A.

*Almoner—V.D. Clinic—*

MISS P. MARSDEN, B.A., A.M.I.A. (To 24.8.46).

MISS C. M. HOLLAND, A.M.I.A. (From 25.8.46).

*Almoners—3.**Home Help Scheme—**Organiser—*MRS. L. E. GRAY.*Vaccination Officer—*

C. H. COOPER.

*Chief Clerk—*

J. C. SLIGHT.

*Sanitary Inspectors (all branches)—19. (At 31.12.46).**Clerks (excluding Hospitals)—28.**Clerks (Casualty Bureau and Group Office)—2. (Closed 30.6.46).**Women Housing Officers—3.**Health Visitors—16.**Tuberculosis Nurses—5.**Clinic Nurses, Orderlies, etc. (1 part time)—8.**City Midwives—32. (At 31.12.46).**Hostels for Unmarried Mothers—6.**Ultra violet Ray Clinic—3.**Bacteriological Laboratory—6.**Skin Clinic—7.*



*Wartime Day Nurseries* (as at 31.12.46)—

Matrons—8 ; Nurses—40 ; Others—18.

*Mortuary Attendants*—2.

*Office Porter*—1.

*Van Driver*—1.

*Cleaners*—19.

*General Labourer*—1.

*Venereal Diseases Hospital*—5.

*Small-pox Hospital* (*Caretakers* : man and wife)—2.

*Rat Control Staff—Labourers*—3.

### CITY ISOLATION HOSPITAL.

*Assistant M.O.H. and Medical Superintendent*—

THOMAS A. DON, M.B., Ch.B., D.P.H. (Returned from Forces  
5.10.46).

ISRAEL M. LIBRACH, M.B., B.Ch., B.A.O., D.P.H.

(Taking the place of Dr. T. A. Don in the Forces).

*Resident Medical Officer*—ESTHER HAMMERMAN, M.D. (Vienna).

*Matron*—MISS F. A. BERKLEY, S.R.N., R.F.N., S.C.M. (To 31.8.46).

„ MISS M. WALSH, S.R.N., R.F.N., S.C.M. (From 1.9.46).

*Steward*—A. SLACK.

<i>Nursing Staff</i>	..	..	41
<i>Others—(Female)</i>	..	..	33
„ —(Male)	..	..	17
			<hr/>
			91
			<hr/>

### NEWSTEAD SANATORIUM.

*Medical Superintendent*—

GEOFFREY O. A. BRIGGS, M.A., M.B., B.Ch., M.R.C.P.(Lond.),  
D.P.H.

*Resident Assistant Medical Officer*—

GRACE M. WILD, M.B., B.Ch., B.A.O., T.D.D.

*Matron*—MISS H. I. RICHARDS, S.R.N., S.C.M., T.A.

*Steward*—C. ABBOTT.

<i>Nursing Staff</i>	..	..	35 (Includes 2 Part-time).
<i>Others—(Female)</i>	..	..	44
„ —(Male)	..	..	31
			<hr/>
			110
			<hr/>

**REPORT**  
OF THE  
**MEDICAL OFFICER OF HEALTH**  
FOR THE YEAR 1946.

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*To the Chairman and Members of the Health Committee.*

In presenting the Annual Report on the Health Services for the year 1946, I direct attention to some noteworthy features. The first is the impossibility of securing adequate staffs at a time when the work is of greater magnitude than ever before.

The report of the Chief Sanitary Inspector shows how greatly the shortage of labour and materials in the building industry has added to the difficulties of the sanitary inspectors in getting properties repaired ; yet this extra work has had to be done by an incomplete staff ; it is almost impossible to engage a trained sanitary inspector at present.

In the services which require nurses or midwives, whether in hospitals or in the homes, staff shortage is acutely felt. Although the salaries and conditions of service of the nursing profession have been made most attractive, and although there are more nurses than ever, the increasing need for nurses exceeds the supply. For instance, at a time when the birth rate is higher than it has been for very many years, the domiciliary midwives are in such short supply that they are conducting nearly twice as many confinements as they ought to do. They deserve praise for the way in which they have responded to their constant night and day calls.

\* \* \*



In the hospitals a similar shortage of nurses exists. This is especially so in the maternity departments at the City Hospital and The Firs, which work to bed capacity with greatly depleted numbers of midwives. At the City Isolation Hospital the number of nurses is so small that the hospital would not be fully available to meet the demands of a large epidemic.

At Newstead Sanatorium, where the waiting list is pathetically long, one new ward lies empty because it cannot be staffed. All these hospitals have very beautiful living accommodation for the staff, but it fails to attract sufficient entrants.

The Day Nurseries, so urgently needed for working mothers, are not fully staffed, while health visitors cannot be obtained in sufficient numbers to give required service to the vastly increasing number of young children. Domestic workers in hospitals and institutions are scarce in spite of high wages.

\* \* \*

The Department does all it can to provide its own trained staffs. The City Hospital, the Isolation Hospital and Newstead Sanatorium, are training schools for nurses. Midwives are trained at the City Hospital and The Firs, in conjunction with the Domiciliary Midwifery Service.

A full-time training course for Health Visitors is being embarked upon by co-operation between University College and the Health Departments of the City and County, on terms advantageous to the nurses selected for the training.

Training courses for staffs of day nurseries and nursery classes are being held by the Education and Health

Departments in co-operation. As for Sanitary Inspectors, the usual evening courses at the Technical College continue, while in addition, a full-time day course for ex-Service candidates is being conducted. All these training courses make extra demands upon the administrative and executive staffs.

\* \* \*

In spite of the difficulties of the times the tale of accomplishments during 1946 is pleasing. The infantile death-rate, a most important index of social progress, reached the lowest figure ever before recorded in Nottingham, namely, 42 per 1,000 births. This is lower than we dared to hope for, and although the report lays stress on the value of the Government's food schemes for expectant and nursing mothers and young children, the work of midwives, health visitors, doctors, hospitals and clinics finds its reward in such a record as this. Nottingham also shares with the rest of the country a low rate of maternal mortality, a pleasing feature of recent years, showing the result of increased ante-natal care and better obstetrical facilities.

\* \* \*

Among infectious diseases, Scarlet Fever, for reasons not explained has for many years ceased to be of a dangerous character ; Diphtheria has been conquered by immunisation and is now a less common disease and will remain so in proportion to the desire of parents ; if parents avail themselves fully of the facilities provided for the immunisation of their children, the disease will disappear ; five deaths in Nottingham were among the non-immunised ; there were no deaths among the immunised.

Cerebro-Spinal Fever, once so much to be feared, now responds to modern treatment in a large proportion of cases. Modern chemicals and penicillin have proved of great value in our hospitals and clinics in their respective spheres, so that weapons are now in our hands in the fight against pneumonia, puerperal fever, venereal disease and many other infections. But measles and whooping-cough still remain a source of serious invalidity and death.

\* \* \*

The work of the venereal disease clinic shows an increase, and in the sphere of treatment with great success. The large numbers attending may not be due to a further increase in the amount of venereal disease, but rather to the effect of propaganda, which has taught people the need for prompt and continued treatment when infected.

The excellent facilities for treatment provided in Nottingham have doubtless proved attractive; the work of the almoner in following up cases among women and children, and in smoothing away difficulties which stand in the way of regular attendance, has also contributed to success. The Central Council for Health Education, at the cost of the Corporation, continues its programme of lectures and film displays to selected audiences.

\* \* \*

Perhaps the most important thing to record is the passing of the National Health Service Act 1946.

This is not the place to discuss the merits or demerits of the Act—to my mind it has both—but there is no doubt the Act will bring about the greatest changes in the hospital and other medical services of the country that have ever been attempted by any piece of legislation.



Locally, the effect will be that the Corporation will no longer control the City Hospital, the City Isolation Hospital, Newstead Sanatorium, The Firs Maternity Hospital, the Smallpox Hospital, the Tuberculosis Clinic, and the Venereal Diseases Clinic, all of which will, in 1948, pass over, with the staffs, to the Regional Hospital Board. The Corporation will still be concerned with the Sanitary Inspection service, the Maternity and Child Welfare Services (other than institutional) and Home Help schemes. It will have new responsibility for district nursing. It may be possible to press on more eagerly with the prevention of disease, and a study of the causes of disease, not merely infectious, but other illnesses. The medico-social aspects of Tuberculosis and Venereal Disease will remain within the interests of the Corporation, and some Corporation servants (health visitors and almoners) will be based on the Tuberculosis and Venereal Disease Clinics, although the buildings and medical staffs will be under the Regional Hospital Boards.

Lunacy and Mental Deficiency will be the responsibility of the Regional Hospital Boards as regards institutional treatment, but care, after-care and general medico-sociological activities will be the responsibility of the Corporation. Ever since the Act became law the administrative officers of the Health Department have been heavily engaged in preparing schemes to bring about the changes necessitated by the Act, and for a long time ahead there will be difficult and onerous tasks to be undertaken, which will permit of no relaxation of effort if success is to be achieved.

\* \* \*

During the year 1946 many important changes in staff took place. The untimely death of Dr. Crowe of

the City Hospital was recorded in the last Report ; his place has been taken by Dr. W. Morton on whom will fall much responsibility for fitting the hospital into its place in the pattern of the Regional Hospital Board.

Miss Rose, who for so many years maintained with distinction her position as Matron of that great hospital, unfortunately retired owing to ill-health ; she is succeeded by Miss D. Annakin.

Dr. Don returned from the Forces to the City Isolation Hospital, and Dr. Librach, who had held his post temporarily, left us.

Dr. Truman and Dr. Landon, associated with the Maternity and Child Welfare Clinics as part-time officers almost from the inception of this work, relinquished the posts in which they have done such valuable service to the community.

The year was also the last complete year of service of Mrs. Bayley, who since 1929, in her position of Matron of the Queen's Drive Homes, had given such valuable help to unmarried mothers and their infants, in an unobtrusive but efficient way.

A new appointment was created when Dr. William Dodd was selected as the first whole-time Deputy Medical Officer of Health. Such an appointment was long overdue and would have been suggested earlier but for the shortage of doctors during the war. The amount of administrative work to be done made such an additional helper very necessary.



I venture to think that the reports of my colleagues in charge of the different sections of the Health Department, which are set out in the following pages are of more than usual interest and will provoke thought.

### GENERAL STATISTICS FOR 1946.

#### POPULATION.

The Registrar-General's Estimate of the civilian population of the City at the middle of 1946 is ..					283,160
AREA (acres) ..	..	..	..	..	16,166
Rateable Value ..	..	..	..	..	£2,196,596
Sum represented by a penny rate (1946-47) ..					£8,857
Rates in the £ (1946-47) ..	..	..	..	..	17/-

#### BIRTHS.

Legitimate Males	2,921	Females	2,751	..	Total	5,672
Illegitimate ..	304	..	267	..	..	571
Total Births ..	..	..	..	..	..	6,243
Birth-rate per 1,000 of population ..					..	22·05
Average 10 years 1891—1900 ..				..	..	29·20
.. .. 1901—1910 ..				..	..	26·90
.. .. 1911—1920 ..				..	..	21·03
.. .. 1921—1930 ..				..	..	18·97
.. .. 1931—1940 ..				..	..	15·96
1941 ..	..	..	..	..	..	16·04
1942 ..	..	..	..	..	..	18·15
1943 ..	..	..	..	..	..	19·11
1944 ..	..	..	..	..	..	21·7
1945 ..	..	..	..	..	..	19·7
1946 ..	..	..	..	..	..	22·05

#### STILLBIRTHS.

Legitimate Males	69	Females	62	..	Total	131
Illegitimate ..	7	..	7	..	..	14
Total stillbirths ..				..	..	145
Rate per 1,000 births (live and still) ..				..	..	22·69

#### DEATHS.

Males	1,754	Females	1,800	..	Total	3,554
Death-rate per 1,000 of population ..				..	..	12·5
Average 10 years 1891—1900 ..				..	..	18·38
.. .. 1901—1910 ..				..	..	16·50
.. .. 1911—1920 ..				..	..	15·55
.. .. 1921—1930 ..				..	..	13·24
.. .. 1931—1940 ..				..	..	13·32
1941 ..	..	..	..	..	..	14·03
1942 ..	..	..	..	..	..	13·07
1943 ..	..	..	..	..	..	14·30
1944 ..	..	..	..	..	..	13·31
1945 ..	..	..	..	..	..	12·9
1946 ..	..	..	..	..	..	12·5

DEATHS FROM PUERPERAL CAUSES.

			Rate per 1,000 (live and still) births.		
			No.	NOTTINGHAM.	ENGLAND & WALES.
Sepsis .. ..	..	..	3	·47	·18
Other Causes ..	..	..	4	·62	1·06
Total .. ..			<u>7</u>	<u>1·09</u>	<u>1·24</u>

The maternal death-rate per 1,000 births (live and still) during the last ten years is given in the following table :—

	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946
Fever .. ..	4	2	2	3	2	3	5	2	3	3
Other causes ..	9	6	4	9	10	9	2	3	4	4
Per 1,000 births	2·8	1·8	1·3	2·7	2·8	2·5	1·38	·85	1·33	1·09

DEATHS FROM MEASLES (all ages) .. ..	5
„ „ WHOOPING COUGH (all ages) .. ..	5
„ „ DIARRHŒA (under 2 years of age) ..	15

INFANT MORTALITY.

Deaths of Infants under 1 year .. ..	265
Rate per 1,000 live births .. ..	42
(Legitimate 40, Illegitimate 50).	
Average 10 years 1891—1900 .. ..	182
„ „ 1901—1910 .. ..	161
„ „ 1911—1920 .. ..	125
„ „ 1921—1930 .. ..	89
„ „ 1931—1940 .. ..	76
1941 .. ..	80
1942 .. ..	62
1943 .. ..	65
1944 .. ..	56
1945 .. ..	53
1946 .. ..	42

Birth-rates, Death-rates, Analysis of Mortality, and Case-rates for certain Infectious Diseases in the year 1946.

(England and Wales, London, 126 Great Towns and 148 Smaller Towns).  
(Provisional Figures based on Weekly and Quarterly Returns).

	England and Wales.	126 County Boro's. and Great Towns including London.	148 Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 Census).	London Administrative County.	Nottingham.
Rates per 1,000 Population.					
BIRTHS :—					
Live	19.1	22.2	21.3	21.5	22.05
Still	0.53	0.67	0.59	0.54	0.56
DEATHS :—					
All Causes	11.5	12.7	11.7	12.7	12.5
Typhoid and Paratyphoid fevers	0.00	0.00	0.00	0.00	0.00
Smallpox	—	—	—	—	—
Measles	0.00	0.01	0.00	0.01	0.02
Scarlet fever	0.00	0.00	0.00	0.00	0.00
Whooping Cough	0.02	0.02	0.02	0.02	0.02
Diphtheria	0.01	0.01	0.01	0.01	0.02
Influenza	0.15	0.13	0.14	0.12	0.14
NOTIFICATIONS :—					
Smallpox	0.00	0.00	—	0.00	—
Scarlet fever	1.38	1.51	1.33	1.42	1.13
Diphtheria	0.28	0.32	0.31	0.24	0.15
Enteric fever	0.01	0.01	0.01	0.01	—
Erysipelas	0.22	0.25	0.22	0.27	0.24
Pneumonia	0.89	1.02	0.74	0.75	0.88
Measles	3.92	4.73	3.70	7.35	4.58
Whooping Cough	2.28	2.48	2.05	2.22	1.45
Rates per 1,000 Live Births.					
Deaths under 1 year of age	43	45	37	41	42
Deaths from Diarrhoea and Enteritis under 2 years of age	4.4	6.1	2.8	4.2	2.4



**Birth-rate, General Death-rate, and Death-rates from the Principal Epidemic and from Tuberculous Diseases, per 1,000 of Population, and Infantile Death-rate per 1,000 Births.**

**NOTTINGHAM.**

**In Five Yearly Periods, 1856-1930, and in Single Subsequent Years.**

	Birth-rate per 1,000 living.	Death-rate per 1,000 living.	Infantile Death-rate.	Death-rate per 1,000 living from								
				7 principal Epidemic Diseases.	Small-pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	"Fever" principally Enteric.	Diarrhoea.	Phthisis other Tuber- culous Diseases
1856-1860	36.8	27.2	209	5.98	0.21	0.80	1.08	0.13	0.76	1.02	2.00	3.22
1861-1865	34.8	24.9	192	3.83	0.09	0.43	0.98	0.12	0.51	0.78	1.09	3.19
1866-1870	31.3	23.8	200	4.34	0.07	0.44	0.73	0.09	0.51	0.92	1.57	2.78
1871-1875	34.1	24.9	192	4.30	0.79	0.31	0.53	0.02	0.26	0.84	1.53	2.42
1876-1880	34.6	21.7	175	3.00	0.00	0.35	0.62	0.03	0.43	0.34	1.06	1.85
1881-1885	36.6	20.9	174	3.22	0.06	0.41	0.77	0.12	0.46	0.31	1.09	1.99
1886-1890	30.4	17.9	168	2.39	0.01	0.42	0.11	0.06	0.45	0.31	1.04	1.52
1891-1895	29.5	18.3	174	2.50	0.01	0.35	0.23	0.08	0.41	0.26	1.12	1.76
1896-1900	28.9	18.5	191	2.66	..	0.46	0.10	0.10	0.36	0.32	1.22	1.86
1901-1905	27.7	17.2	170	2.22	0.01	0.38	0.09	0.19	0.31	0.20	1.01	1.74
1906-1910	26.1	15.8	152	1.64	0.00	0.33	0.05	0.13	0.27	0.11	0.75	1.70
1911-1915	22.9	15.1	137	1.61	..	0.36	0.06	0.11	0.21	0.05	0.83	1.57
1916-1920	19.1	16.0	113	1.02	..	0.25	0.02	0.19	0.17	0.01	0.37	1.62
1921-1925	20.4	12.9	90	0.65	..	0.16	0.02	0.06	0.13	0.01	0.26	1.17
1926-1930	17.5	13.6	88	0.68	..	0.05	0.02	0.20	0.11	0.00	0.30	1.14
1931	17.2	13.6	82	0.45	..	0.15	..	0.02	0.04	0.01	0.23	1.12
1932	16.4	12.5	80	0.35	..	0.02	..	0.03	0.12	..	0.18	0.97
1933	15.8	13.4	85	0.51	..	0.18	0.01	0.02	0.04	0.01	0.25	1.04
1934	15.6	12.3	69	0.33	..	0.06	0.02	0.02	0.07	0.00	0.15	0.89
1935	15.7	12.5	81	0.38	..	0.07	0.02	0.05	0.02	0.00	0.22	0.98
1936	15.2	13.2	89	0.46	..	0.08	0.02	0.09	0.09	0.00	0.18	0.93
1937	16.0	13.4	80	0.39	..	0.08	0.00	0.03	0.03	0.01	0.24	0.99
1938	15.6	12.7	71	0.22	..	0.03	0.01	0.01	0.04	..	0.13	0.83
1939	15.8	13.3	66	0.23	..	..	0.01	0.01	0.01	0.01	0.19	0.87
1940	16.5	15.5	61	0.17	..	0.02	0.00	0.04	0.02	..	0.09	1.03
1941	16.0	14.0	80	0.49	..	0.02	..	0.05	0.07	0.00	0.35	1.09
1942	18.2	13.1	62	0.32	..	0.05	0.00	0.04	0.05	0.00	0.18	0.89
1943	19.1	14.3	65	0.21	..	0.02	..	0.02	0.04	..	0.13	0.97
1944	21.7	13.3	56	0.38	..	0.01	0.01	0.01	0.04	..	0.31	0.84
1945	19.7	12.9	53	0.11	..	0.03	0.01	0.03	0.01	..	0.13	0.77
1946	22.0	12.5	42	0.19	..	0.02	0.00	0.02	0.02	..	0.05	0.71

**Summary of Deaths at all ages from various causes, 1946.**  
**(R.G.'s International Short List).**

						1946
TOTAL DEATHS .. .. .						3,554
Deaths under 1 year	..	..	..	..	..	265
„ 1— 5 years..	..	..	..	..	..	45
„ 5—45 „ ..	..	..	..	..	..	376
„ 45—65 „ ..	..	..	..	..	..	860
„ 65 and over ..	..	..	..	..	..	2,008
CAUSES OF DEATHS :—						
Typhoid and Paratyphoid Fevers		..	..	..	..	—
Measles .. .. .	..	..	..	..	..	5
Scarlet Fever .. .. .	..	..	..	..	..	1
Whooping-Cough .. .. .	..	..	..	..	..	5
Diphtheria .. .. .	..	..	..	..	..	5
Influenza .. .. .	..	..	..	..	..	40
Encephalitis Lethargica .. .. .	..	..	..	..	..	3
Cerebro-Spinal Fever .. .. .	..	..	..	..	..	2
Tuberculosis of Respiratory System .. .. .	..	..	..	..	..	175
Other tuberculous diseases .. .. .	..	..	..	..	..	28
Syphilis .. .. .	..	..	..	..	..	29
Ac-Poliomyelitis and Polioencephalitis .. .. .	..	..	..	..	..	1
Cancer, malignant disease .. .. .	..	..	..	..	..	531
Diabetes .. .. .	..	..	..	..	..	31
Cerebral Hæmorrhage, etc. .. .. .	..	..	..	..	..	333
Heart Disease .. .. .	..	..	..	..	..	1022
Other circulatory diseases .. .. .	..	..	..	..	..	105
Bronchitis .. .. .	..	..	..	..	..	244
Pneumonia (all forms) .. .. .	..	..	..	..	..	204
Other respiratory diseases .. .. .	..	..	..	..	..	54
Peptic Ulcer .. .. .	..	..	..	..	..	46
Diarrhœa, etc. .. .. .	..	..	..	..	..	15
Appendicitis .. .. .	..	..	..	..	..	9
Other digestive diseases .. .. .	..	..	..	..	..	55
Acute and chronic Nephritis .. .. .	..	..	..	..	..	76
Puerperal Sepsis .. .. .	..	..	..	..	..	3
Premature Birth .. .. .	..	..	..	..	..	50
Other puerperal cases .. .. .	..	..	..	..	..	4
Congenital debility, malformations, etc. .. .. .	..	..	..	..	..	96
Suicide .. .. .	..	..	..	..	..	32
Other violence .. .. .	..	..	..	..	..	73
Other defined diseases .. .. .	..	..	..	..	..	247



**INFANT MORTALITY during the year 1946.**  
**Deaths from stated causes at various ages under One Year.**

CAUSE OF DEATH.	Under 1 Week.	1—2 Weeks.	2—3 Weeks.	3—4 Weeks.	TOTAL UNDER 1 MONTH.	1—3 Months.	3—6 Months.	6—9 Months.	9—12 Months.	TOTAL DEATHS UNDER ONE YEAR.
CERTIFIED .. ..	111	12	10	6	139	42	50	21	13	265
UNCERTIFIED .. ..	—	—	—	—	—	—	—	—	—	—
Small-pox .. ..	—	—	—	—	—	—	—	—	—	—
Chicken-pox .. ..	—	—	—	—	—	—	—	—	—	—
Measles .. ..	—	—	—	—	—	—	1	—	1	2
Scarlet Fever .. ..	—	—	—	—	—	—	—	—	—	—
Whooping-Cough .. ..	—	—	—	—	—	1	—	—	2	3
Diphtheria and Croup .. ..	—	—	—	—	—	—	—	—	—	—
Influenza .. ..	—	—	—	—	—	2	—	—	—	2
Erysipelas .. ..	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever .. ..	—	—	—	—	—	—	—	—	1	1
Tuberculous Meningitis .. ..	—	—	—	—	—	—	—	—	—	—
Abdominal Tuberculosis .. ..	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases .. ..	—	—	—	—	—	—	—	—	—	—
Meningitis ( <i>not Tuberculous</i> ) .. ..	—	—	—	1	1	—	1	2	—	4
Convulsions .. ..	—	—	1	—	1	1	3	—	—	5
Laryngitis .. ..	—	—	—	—	—	—	—	—	1	1
Bronchitis .. ..	1	—	—	—	1	1	4	1	—	7
Pneumonia (all forms) .. ..	2	1	1	2	6	25	27	12	5	75
Diarrhoea & Enteritis .. ..	—	—	1	1	2	3	6	3	1	15
Gastritis .. ..	—	—	—	—	—	—	—	—	—	—
Syphilis .. ..	1	—	—	—	1	1	1	—	—	3
Rickets .. ..	—	—	—	—	—	—	—	—	—	—
Suffocation (overlying) .. ..	—	—	—	—	—	2	1	—	—	3
Difficulty or Injury at Birth .. ..	7	1	—	—	8	—	—	—	—	8
Atelectasis .. ..	25	1	—	—	26	2	—	—	—	28
Premature Birth .. ..	44	3	2	—	49	1	—	—	—	50
Congenital Malformations .. ..	13	4	2	—	19	2	2	—	1	24
Atrophy, Debility and Marasmus .. ..	5	—	—	1	6	—	—	—	—	6
Other Causes .. ..	13	2	3	1	19	1	4	3	1	28
TOTALS.. ..	111	12	10	6	139	42	50	21	13	265

In 1946 there were 531 deaths from cancer in its various forms.

**CANCER.**

NOTTINGHAM DEATHS, 1946  
(International Classification).

SHOWING AGE-PERIOD AT DEATH.

		0—	5—	10—	15—	20—	25—	35—	45—	55—	65—	75—	Total
Buccal cavity and Pharynx	m. f.	— —	— —	— —	— —	— —	— —	— —	3 1	4 —	5 1	9 1	21 3
Digestive Organs and Peritoneum	m. f.	— —	— —	— —	— —	— —	4 1	8 6	12 13	29 32	56 36	30 21	139 109
Respiratory Organs	m. f.	— —	— —	— —	— 1	— —	2 —	5 3	10 3	35 4	18 8	4 1	74 20
Uterus	f.	—	—	—	—	—	1	3	14	10	7	9	44
Other Female Genital Organs	f.	—	—	—	—	—	—	—	4	6	4	2	16
Breast	f.	—	—	—	—	—	1	2	9	16	14	7	49
Male Genito-urinary Organs	m.	1	—	—	—	—	—	—	4	7	10	7	29
Skin	m. f.	— —	— —	— —	1 —	— —	— —	— —	— —	2 —	1 1	— —	4 1
Other or Unspecified Organs	m. f.	— —	— —	— —	— —	— —	— —	2 1	2 1	3 3	4 3	1 2	12 10

**SANITARY CIRCUMSTANCES OF THE CITY,  
HOUSING AND  
INSPECTION AND SUPERVISION OF FOOD.**

*Report by Mr. Alfred Wade, Chief Sanitary Inspector.*

**Sanitary Inspection of the Area.**

The sanitary inspection staff continued to be seriously depleted. Efforts to obtain the services of additional qualified sanitary inspectors were unsuccessful and the limited staff available concentrated on the more urgent tasks such as remedying, as far as possible, housing defects and insanitary conditions. It was a most difficult year so far as building repairs were concerned. The shortage of labour and certain materials and the licensing of building work again contributed to delay in some cases.

The statistical tables which follow give details of the notices respecting 12,939 nuisances or defects which were served during 1946. The requirements of 2,826 notices which were not complied with by the persons responsible, were carried out by the Department and the expenses recovered from the owners. There is, however, a limit to the amount of building work which the Department can arrange to carry out in default of owners, as the Corporation's contractors are very fully employed and are reluctant to give firm estimates of costs owing to the shortages of labour and materials.

**(i) Number of Inspections.**

The number of the inspections made by the District Sanitary Inspectors during the year was :—

First Visits	..	..	..	19,869
Re-Visits	..	..	..	29,605
				<hr/>
Total number of inspections	..	..	..	49,474
				<hr/>



**(ii) Number of Notices Served and Complied with.**

Notices in respect of premises:—	District No. 1.	District No. 2.	District No. 3.	District No. 4.	District No. 5.	District No. 6.	District No. 7.	District No. 8.	Totals.
OUTSTANDING (1st January 1946) ..	437	829	636	1,252	713	851	903	845	6,466
Served ..	1,371	1,854	1,673	1,823	1,426	1,473	1,890	1,429	12,939
Complied with ..	1,405	2,263	1,681	2,260	1,618	1,780	2,252	2,003	15,262
OUTSTANDING (1st January 1947) ..	403	420	628	815	521	544	541	271	4,143

**(iii) Details of Notices Served and Complied with.**

	Served.	Complied with.
Housing Act, 1936, Section 9 .. ..	5,087	5,117
Public Health Acts .. ..	7,852	10,145
Defective Houses .. ..	5,321	5,490
Housing Repairs—Roofs .. ..	2,834	2,632
Walls .. ..	2,436	2,382
Floors and Ceilings .. ..	1,338	1,125
Windows .. ..	1,937	1,917
Fireplaces .. ..	1,334	1,233
Coppers .. ..	561	566
Sinks, provision of .. ..	27	30
Sinks, repair of .. ..	332	374
Internal water supply provision .. ..	6	6
Water supply, repair of .. ..	248	283
Rainwater conductors .. ..	1,575	1,426
Others .. ..	1,428	1,301
Houses, cleansing of .. ..	57	101
Houses, disinfestation of .. ..	82	107
Overcrowding .. ..	1	—
Licensed premises, cleansing or improvement of .. ..	8	9
Drains, cleansing of .. ..	273	279
Drains, repair of, etc. .. ..	342	353

				Served.	Complied with.
Panterpits, abolition of	..	..	..	12	15
Additional W.C.'s provision of	..	..	..	4	4
W.C.'s clearance of	..	..	..	142	134
W.C.'s, repair of	..	..	..	1,665	1,744
Closets, cleansing of	..	..	..	12	16
Courts and Yards, Paving of	..	..	..	60	16
Cleansing of	..	..	..	10	16
Repair of	..	..	..	342	381
Nuisance from Pigs	..	..	..	3	2
Fowls	..	..	..	36	44
Other Animals	..	..	..	18	16
Offensive Trades	..	..	..	—	—
Food Premises	..	..	..	41	25
Manure Pits, repair of	..	..	..	1	—
abolition of	..	..	..	—	1
Offensive accumulations, removal of	..	..	..	62	62
Rat & Mice Nuisances, Abatement of	..	..	..	1,106	1,151
Dust bins, provision of	..	..	..	3,809	5,756
Miscellaneous	..	..	..	279	310
Tents, Vans & Sheds	..	..	..	13	9
Houses-let-in-Lodgings	..	..	..	6	4
Common Lodging Houses	..	..	..	1	—
Factories	..	..	..	41	27
Workplaces	..	..	..	—	2

**(iv) Notices under the Public Health Act, 1936.**

Section 92 (a) Houses	..	..	..	94	68
(b) Others	..	..	..	8	10
Section 75 Dustbins	..	..	..	1,931	3,113
Section 39 Drains	..	..	..	250	239
Section 44 Inadequate Closet accommoda- tion	..	..	..	2	1
Section 45 Closets	..	..	..	10	11
Section 56 Paving	..	..	..	121	102
Section 287 Notice of Entry	..	..	..	12	12
Section 79 Removal of Noxious matter	..	..	..	1	1
Section 83 Cleansing of filthy or verminous premises	..	..	..	1	5



	Served.	Complied with.
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**Notices under the Nottingham Corporation Act, 1923.**

Section 73	Repair of Water-Closets	..	103	119
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**Notices under the Nottingham Corporation Act, 1935.**

Section 19	Cleansing and repair of drains, water-closets and soil pipes	..	1,279	1,224
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**Notices under the Housing Act, 1936.**

Section 9	..	..	..	..	2,205	2,106
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*Work done by Corporation in default—2,826.*

**Water.**

The water supply of the City has been satisfactory in quality and in quantity. There are very few houses within the City boundaries which are not provided with water from the public mains.

The City Water Engineer arranges for the frequent examination by the City Analyst of samples of raw and treated water from all sources. Both bacteriological examinations and chemical analyses are made and the results are communicated to the Medical Officer of Health.

There is close co-operation between the Water Department and the Health Department to safeguard the purity of the municipal water supply and to reduce to a minimum the waste of water.

**Factories.**

(a) *Factories with mechanical power*—In 9 instances, defects remediable under Section 7 of the Factories Act were reported by H.M. Inspector of Factories and in each case suitable action was taken.

(b) *Factories without mechanical power*—The number of factories without mechanical power is 501.

(c) *Outwork*—A considerable amount of homework is carried on in the City, the chief trades employing outworkers being the making, altering and finishing of wearing apparel, the making, ornamenting, mending and finishing of lace and nets and the making of paper bags. 1,893 visits were paid to the premises of outworkers during the year.

The following table gives particulars of administrative action taken under the Factories Act, 1937 :—

**1. Inspection for purposes of provisions as to health.**

Premises. (1)	Inspections. (2)	Number of Written Notices. (3)	Occupiers prosecuted. (4)
Factories with mechanical power	48	11	—
Factories without mechanical power .. .. .	13	1	—
Other premises under the Act (including works of building and engineering construction but not including outworkers' premises) .. .. .	—	—	—
	61	12	—

## 2. Defects found in Factories.

Particulars. (1)	Number of defects		Referred to H.M. Inspector. (4)	Number of defects in respect of which Prosecu- tions were instituted. (5)
	Found. (2)	Remedied. (3)		
Want of cleanliness (S.1) ..	15	11	—	—
Overcrowding (S.2) ..	—	—	—	—
Unreasonable temperature (S.3) ..	—	—	—	—
Inadequate ventilation (S.4)	—	1	—	—
Ineffective drainage of floors (S.6) ..	—	—	—	—
Sanitary Con- veniences {	Insufficient ..	1	—	—
	Unsuitable or defective ..	2	—	—
	Not separate for sexes ..	—	—	—
Other Offences ..	11	5	—	—
(Not including offences re- lating to Home Work or offences under Sections mentioned in Schedule to Ministry of Health (Fac- tories & Workshops Transfer of Powers) Order 1921, and re-enacted in the Third Schedule to Factories Act, 1937) ..				
	32	20	—	—

### Common Lodging Houses.

The position with regard to Common Lodging houses in the City is very satisfactory. All the unsatisfactory premises have been closed down and only two establishments are now available. One is the Municipal Hostel (Sneinton House) erected under the provisions of the Housing Act to accommodate lodgers displaced from unfit premises and the other is the Salvation Army establishment at Aberdeen Street. The Municipal Hostel is planned on modern lines and each bed has a private cubicle. The Aberdeen Street Hostel was adapted in a disused factory building where many beds are available in dormitories or in private cubicles.



**Houses-Let-in-Lodgings.**

There are 176 registered houses-let-in-lodgings in the City. Many are most unsatisfactory as the accommodation provided in most cases was intended for use by one family and not as now obtaining, by numerous families. The number of registered houses-let-in-lodgings does not indicate the true position because there is no necessity on the part of occupiers to register such premises until required to do so by the local authority. Consequently, many such houses are established without the knowledge of the Health Department.

The bye-law regarding the cleansing and decoration of such premises during the month of April was enforced where necessary.

**Measures to Combat Infestation by Rats, Mice, Insect Pests, etc.**

The services of trained operators provided free by the Corporation for work in private dwelling-houses were again in great demand and the modern methods of baiting, poisoning and gassing have proved effective in the destruction of rats and mice. Contact insecticides have been used in the disinfection of verminous houses. The use of gas in buildings for fumigation purposes has not been adopted owing to the difficulties of application and the danger which sometimes accompanies it.

**Canal Boats.**

The Canals, and other navigable waters within the City have been visited on 16 occasions during the Year and 39 boats were inspected. Frequent visits were made at various times during the hours laid down by the Act, and the Inspector has at all times been allowed free access to the cabins of the boats inspected.

The number of women carried on the boats inspected was 21, the number of children under 5 years of age was 9 and the number of children between 5 and 12 years of age was 15.

Sixteen notices were issued against owners of boats in connection with the following twenty-three infringements of the Act and Regulations :—

Boats not properly marked .. ..	5
Failure to produce Registration Certificate	7
Cabins in need of repair or painting ..	8
Cabins overcrowded .. ..	2
Defective water tank .. ..	1

It was not necessary in any case to resort to legal proceedings.

No case of infectious disease on a canal boat was reported during the year, nor was it necessary to detain any boat for cleansing or disinfection.

There were no new boats registered during the year.

The total number of boats now in use and registered by this Authority is 41.

The Education Authority was notified with regard to seven children of school age who were living on canal boats and who were visiting the City for a period longer than two days.

### **Shops Acts, 1912-1938.**

#### **Number of Inspections.**

The number of inspections made by the Shop Acts Inspectors during the year was :—

First Visits .. ..	2,166
Re-Visits .. ..	593
	<hr/>
	2,759
	<hr/>

## (1) HEALTH AND COMFORT OF SHOPWORKERS.

Details of action under the provisions of the Shop Acts, 1934, are given below :—

			Served.	Complied with.
<i>Number of notices served and complied with :—</i>				
Informal notices	..	..	308	284
Statutory Notices	..	..	2	1

All the above notices were served in connection with Retail Shops.

			Served.	Complied with.
<i>Details of notices served and complied with :—</i>				
Want of ventilation	..	..	4	4
Want of heating	..	..	6	5
Want of lighting	..	..	1	—
Want of washing facilities	..	..	4	5
Want of facilities for taking meals	..	..	1	—
Sanitary Accommodation—				
Insufficient, unsuitable or defective	..	..	87	77
Not separate for sexes	..	..	—	—
Walls, floors and ceilings, repair of	..	..	329	251
Roofs and rainwater conductors, repair or renewal of	..	..	16	10
Drains, cleansing or repair of	..	..	26	22
Yards, cleansing or repair of	..	..	11	13
Offensive accumulations, removal of	..	..	25	18
Dustbins, provision of	..	..	34	24
Miscellaneous nuisances	..	..	34	22
Absence of forms required under the Shops Acts	..	..	25	37

## (2) EMPLOYMENT OF YOUNG PERSONS.

*Number of inspections.*

The number of inspections made by the Shop Acts Inspectors during the year was :—

First Visits	..	..	22
Re-Visits	..	..	11
			—
			33
			==



	Served.	Complied with.
<i>Number of notices served and complied with :—</i>		
Informal notices .. .. .	—	4
<i>Types of premises in respect of which notices were served and complied with :—</i>		
Retail Shops .. .. .	—	3
Places of Entertainment .. .. .	—	1
<i>Details of notices served and complied with :—</i>		
Absence of forms required under the Young Persons (Employment) Act, 1938 .. .. .	—	4

## Housing.

### 1. Inspection of Dwelling-houses during the Year.

(1) (a) Total number of dwelling-houses inspected for housing defects (under the Public Health or Housing Acts) .. .. .	12,939
(b) Number of inspections made for the purpose ..	16,673
(2) (a) Number of dwelling-houses (included under Sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1938 .. .. .	2,205
(b) Number of inspections made for the purpose ..	5,849
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .. .. .	—
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation .. .. .	5,321

### 2. Remedy of defects during the year without the service of formal notices.

Number of defective dwelling-houses rendered fit in consequence of informal notices by the Local Authority or their Officers .. .. .	3,384
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### 3. Action under Statutory Powers during the Year.

#### A.—*Proceedings under Sections 9, 10 & 16 of the Housing Act, 1936.*

(1)	Number of dwelling-houses in respect of which notices were served requiring repairs ..	2,205
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices—	
(a)	By Owners .. .. .	1,920
(b)	By Local Authority in default of owners	186

#### B.—*Proceedings under the Public Health Acts.*

(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied .. .. .	465
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices—	
(a)	By Owners .. .. .	509
(b)	By Local Authority in default of owners	26

#### C.—*Proceedings under Sections 11 & 13 of the Housing Act, 1936.*

(1)	Number of dwelling-houses in respect of which demolition orders were made .. .. .	—
(2)	Number of dwelling-houses demolished in pursuance of demolition orders .. .. .	—

#### D.—*Proceedings under Section 12 of the Housing Act, 1936.*

(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made .. .. .	—
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit .. .. .	—

**4. Housing Act, 1936. Part IV.—Overcrowding.**

(a)	(1)	Number of dwelling-houses overcrowded at the end of the year	.. ..	344
	(2)	Number of families dwelling therein	..	532
	(3)	Number of persons dwelling therein	..	2,931 (2,697 units)
(b)		Number of new cases of overcrowding reported during the year	.. .. .	102

The *actual* position in respect of overcrowding is not reflected by the above figures. They represent only those cases of legal overcrowding which have come to the notice of the Health Department. To ascertain the true position would necessitate a full detailed survey of all houses in the City.

**Demolition and Closing of Unfit Houses.**

Owing to the housing shortage, there is no action to record in this connection and therefore the figures given in the Report for 1940 remain the same.

**Meat and Other Foods.**

The following slaughter-houses were in use and occupied by the Ministry of Food :—

The Public Slaughter-house.  
Egerton Street (Nottingham Co-operative Society).

The Cinderhill Working Men's Co-operative Society Ltd., Church Street, Old Basford, was used occasionally by a local pig club for the slaughter of pigs. The required notice of slaughter was given to this Department and all pigs were inspected.



Meat Inspectors were on duty at the Public Slaughterhouse the whole of the time slaughtering was in progress. The hours of duty have been very long and arduous and for many weeks all Meat Inspectors were on duty seven days a week. Over a long period the daily number of animals slaughtered was far above the capacity of the building and it was impossible for the lairs, slaughtering halls, hanging room, equipment and roadways to be kept clean. The Health Committee made strong complaint to the Ministry of Food on the matter.

During the year the number of animals slaughtered was 117,609 an increase of 32,333 on the previous year.

The number of visits to food premises were as follows :—

Private Slaughter-houses	..	203
Butchers' Premises	.. ..	365
Other Food Premises	.. ..	1,243

These visits do not include the daily routine visits of Inspection to the Wholesale and Retail Markets.

The local knackery at the Eastcroft Depot, London Road, was under the constant supervision of the Meat Inspectors.

#### **Shell Fish.**

Shell Fish from layings in various parts of Great Britain and Ireland were received into the Wholesale Fish Market. These consignments were carefully supervised and at frequent intervals, samples were obtained for bacteriological examination.

All samples taken during the year were found to be satisfactory.

The number of animals slaughtered for food and inspected in the City during the year were :—

Bulls ..	..	..	..	475
Bullocks	..	..	..	10,150
Cows ..	..	..	..	8,354
Heifers	..	..	..	5,366
Calves	..	..	..	18,122
Sheep..	..	..	..	61,239
Pigs ..	..	..	..	3,903
Total .. ..				<hr/> 117,609 <hr/>

The following is a summary of meat confiscated as being diseased, unsound, unwholesome or unfit for the food of man :—

(a) SURRENDERED VOLUNTARILY :—

<i>Home Killed Meat—</i>				stones.	lbs.
Beef ..	..	..	..	42,663	7
Mutton and Lamb	..	..	..	391	3
Pork ..	..	..	..	989	7
Veal ..	..	..	..	333	0
Offals ..	..	..	..	32,182	8
Total .. ..				<hr/> 76,559 <hr/>	<hr/> 11 <hr/>

<i>Imported Meat—</i>				stones	lbs.
Beef ..	..	..	..	202	6
Pork ..	..	..	..	5	0
Offals ..	..	..	..	3	7
Total .. ..				<hr/> 210 <hr/>	<hr/> 13 <hr/>

Grand Total .. 76,770 stones 10 lbs.

(b) SEIZED : Nil.

Number of animals killed and of carcasses inspected and number confiscated either wholly or in part on account of disease.

	Cattle excluding Cows.				Cows.	Calves.	Sheep and Lambs.	Pigs.	Total.
	Bulls.	Bull'ks.	Heifers	Total.					
Number of Animals killed and Carcasses inspected	475	10,150	5,366	15,991	8,354	28,122	61,239	3,903	117,609
<i>All Diseases except Tuberculosis.</i>	1	6	5	12	38	124	107	32	313
Whole Carcasses affected .. ..									
Carcasses in which some part or organ was affected .. ..	29	2,354	845	3,228	4,356	15	714	155	8,468
Percentage of number inspected affected with disease other than Tuberculosis .. ..	6.3	23.2	15.8	20.2	52.5	.4	1.3	4.7	7.4
<i>Tuberculosis only.</i>	3	41	73	117	771	24	—	29	941
Whole carcasses affected .. ..									
Carcasses in which some part or organ was affected .. ..	170	1,392	846	2,408	3,952	—	—	466	6,826
Percentage of number inspected affected with Tuberculosis .. ..	36.4	14.1	17.1	15.7	56.5	.08	—	12.6	6.0



**Other Foods.**

The following quantities of foodstuffs other than meat were confiscated on account of disease or unsoundness :—

			stones.	lbs.
Artificial Cream	..	..	3	4
Butter	..	..	13	2
Beef Suet	..	..	—	11
Baking Powder	..	..	15	0
Biscuits	..	..	119	12
Biscuit Powder	..	..	160	0
Batter Mixture	..	..	121	3
Bread	..	..	45	0
Bacon	..	..	119	3
Black Puddings	..	..	4	10
Bottled Fish	..	..	10	12
Chocolate	..	..	12	3
Chocolate Powder	..	..	12	0
Cereals	..	..	624	6
Cooking Fats	..	..	187	0
Cooked Meats	..	..	3	7
Cooking Oil	..	..	7	5
Cocoa	..	..	2	1
Cheese	..	..	3	4
Curry Powder	..	..	4	8
Coffee Beans..	..	..	9	6
Coffee	..	..	2	0
Cake Mixtures	..	..	7	0
Dried Fruit	..	..	876	3
Dates	..	..	20	0
Dried Milk	..	..	78	12
Dried Peas	..	..	8	0
Eggs (Shell)	..	..	18	2
Eggs (Dried) ..	..	..	1	0
Flour	..	..	165	4
Flavouring Powder	..	..	1	2
Fish Cakes	..	..	12	0
Figs	..	..	3	12
Gravy Salt	..	..	1	12
Hips and Haws	..	..	1	0
Ice Cream Powder	..	..	30	0
Jam	..	..	28	5
Carried forward	..	..	2,733	9

				stones.	lbs.
	Brought forward	..	..	2,733	9
Lard	..	..	..	2,400	2
Lactose	..	..	..	28	0
Margarine	..	..	..	19	12
Malt	..	..	..	8	5
Malt Extract	..	..	..	1	0
Mustard	..	..	..	2	9
Macaroni	..	..	..	4	12
Meat Pies	..	..	..	1	4
Pyclets	..	..	..	20	0
Pea Flour	..	..	..	1	4
Puddings	..	..	..	2	9
Pickles	..	..	..	9	3
Pastry Cream	..	..	..	3	4
Rhubarb Pulp	..	..	..	25	7
Rusks	..	..	..	169	10
Sweets	..	..	..	19	11
Sugar	..	..	..	1	2
Sugar Substitute	..	..	..	4	7
Soup Powder	..	..	..	42	9
Soyaghetti	..	..	..	13	0
Split Peas	..	..	..	5	4
Semolina	..	..	..	957	10
Salt	..	..	..	32	6
Salmon Creme	..	..	..	6	7
Syrup	..	..	..	3	0
Spice Powder	..	..	..	6	10
Soya Flour	..	..	..	4	12
Sausage Meat	..	..	..	21	4
Tea	..	..	..	40	9
Vanilla Powder	..	..	..	80	0
Yeast	..	..	..	1	0
Miscellaneous	..	..	..	106	0
Canned Goods	..	..	..	3,290	2
Wet Fish	..	..	..	2,439	10
Dry Fish	..	..	..	1,062	5
Shell Fish	..	..	..	6,098	1
Rabbits	..	..	..	9	2
Poultry	..	..	..	3	0
Fruit	..	..	..	643	7
Vegetables	..	..	..	4,505	11
	Total	..	..	24,829	9

Grand total of all foodstuffs confiscated during the year :—

101,600 stones 5 lbs. or 635 tons.

### **Milk Supply.**

The number of cowkeepers on the register at the end of 1946 was 20, and the average number of cows housed within the city was 439. The number of milk purveyors was 200 ; nine were removed from the register during the year. The conditions under which milk was produced, stored, treated and distributed were regularly inspected to ensure that the statutory requirements applicable to the trade were complied with.

### **Milk (Special Designations) Regulations 1936-46.**

During the year the following licences were granted under the provisions of the above regulations :—

Licences to produce Accredited Milk . . . . .	5
Supplementary Licence to sell Accredited Milk . . . . .	1
Licences to bottle Tuberculin Tested Milk . . . . .	2
Dealers' Licences to sell Tuberculin Tested Milk . . . . .	11
Supplementary Licences to sell Tuberculin Tested Milk . . . . .	2
Licences to pasteurise and sell Pasteurised Milk . . . . .	5
Supplementary Licences to sell Pasteurised Milk . . . . .	3
Licence to pasteurise and sell Tuberculin Tested Milk (Pasteurised) . . . . .	1
Dealer's Licence to sell Tuberculin Tested Milk (Pasteurised) . . . . .	1

### **Tuberculin-Tested Milk.**

77 Samples were procured and 65 complied with the prescribed standards. 12 were unsatisfactory and appropriate action was taken.

### **Accredited Milk.**

41 Samples were taken, 37 of which proved satisfactory.



### **Pasteurised Milk.**

70 Samples of milk sold under licence were obtained for examination and all were satisfactory. To test the efficiency of pasteurisation, 400 samples were subjected to the phosphatase test and 393 were proved to have been correctly heat-treated.

### **Heat-Treated Milk.**

Although the heat treatment of milk is not legally compulsory, the Ministry of Food have a scheme under which milk dealers, subject to certain conditions, receive additional allowances in respect of milk treated by heat in plants and premises authorised by the Ministry. At the request of the Ministry, the department procured 318 samples which were subjected to the phosphatase test, and 12 samples to which the methylene blue test was applied. Of the former only two, and of the latter, one failed to satisfy the tests.

### **Ungraded Milk.**

32 Samples were taken and submitted for bacterial count and coli tests, and, as from April 1st Methylene Blue Test. Of these, 28 were satisfactory and four otherwise. The bacterial count ceased to be recognised as a test for milk after 31st March 1946.

### **Examination of Milk for Tubercle Bacilli.**

37 Samples of raw milk were examined and one (or 2·7 per cent.) gave positive results on biological testing. This case was referred to the Ministry of Agriculture (Animal Health Division) for investigation. The positive results shown in previous years were :—

1945	..	..	..	10·17 per cent.
1944	..	..	..	4·4 „
1943	..	..	..	6·9 „
1942	..	..	..	8·3 „

11 Samples of pasteurised milk were also examined for tubercle bacilli and all gave negative results.

### Manufacture and Sale of Ice-Cream.

The Nottingham Corporation Act 1935 provides for the compulsory registration with the Sanitary Authority of persons carrying on the manufacture and/or sale of ice-cream and premises used for such purpose. During 1946, 44 applications for such registration were received and placed on the register. 24 of these applications were in respect of the transfer of existing registrations to new occupiers of business premises.

### Food Adulteration.

During the year the following samples were obtained :—

Formal	..	..	486	Analysed by Public Analyst.
Informal		..	871	„ „ „
Informal Milk		..	145	Tested by Inspectors.

Total	..	1,502
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The following table shows the nature of the samples taken, together with the results of the Public Analyst's examination :—

Article	No. of Samples			No. Genuine			No. Adulterated		
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total
Milk .. ..	269	702	971	258	699	957	11	3	14
Margarine .. ..	35	47	82	35	47	82	—	—	—
Butter .. ..	28	49	77	28	49	77	—	—	—
Lard .. ..	10	14	24	10	14	24	—	—	—
Cheese .. ..	4	33	37	4	33	37	—	—	—
Cooking Fat .. ..	8	6	14	8	6	14	—	—	—
Coffee .. ..	12	1	13	12	1	13	—	—	—
Cocoa .. ..	12	—	12	12	—	12	—	—	—
Coffee and Chicory .. ..	4	—	4	4	—	4	—	—	—
Sultanas .. ..	3	—	3	3	—	3	—	—	—
Semolina .. ..	13	—	13	13	—	13	—	—	—
Malted Oatmeal .. ..	2	—	2	2	—	2	—	—	—
Baking Powder .. ..	2	—	2	2	—	2	—	—	—
Egg Sub. Powder .. ..	1	—	1	1	—	1	—	—	—
Suet Pudding Powder .. ..	1	—	1	1	—	1	—	—	—
Cake Mixture .. ..	11	—	11	11	—	11	—	—	—
Jelly Creme Powder .. ..	1	—	1	1	—	1	—	—	—
Carried forward .. ..	416	852	1268	405	849	1254	11	3	14

Article	No. of Samples			No. Genuine			No. Adulterated		
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total
Brought forward ..	416	852	1268	405	849	1254	11	3	14
Barley Flakes ..	4	—	4	4	—	4	—	—	—
Malted Milk Powder	1	—	1	1	—	1	—	—	—
Potted Meat Paste ..	10	—	10	6	—	6	4	—	4
Raisins ..	1	—	1	1	—	1	—	—	—
Malted Soya Food ..	2	—	2	2	—	2	—	—	—
Pudding Mixture ..	13	—	13	13	—	13	—	—	—
Chocolate Cup ..	1	—	1	1	—	1	—	—	—
Jam ..	2	—	2	2	—	2	—	—	—
Barley Flour ..	2	—	2	2	—	2	—	—	—
Proccssed Peas ..	1	—	1	1	—	1	—	—	—
Golden Syrup ..	2	—	2	2	—	2	—	—	—
Pea Flour ..	1	—	1	1	—	1	—	—	—
Beef Sausage ..	3	—	3	2	—	2	1	—	1
Compound Mustard	3	1	4	3	1	4	—	—	—
Curry Powder ..	1	—	1	1	—	1	—	—	—
Tea ..	2	1	3	2	1	3	—	—	—
Ground Ginger ..	2	—	2	2	—	2	—	—	—
Macaroni ..	1	—	1	1	—	1	—	—	—
Oatmeal ..	1	1	2	1	1	2	—	—	—
Pearl Barley ..	1	—	1	1	—	1	—	—	—
Powdered Gelatine ..	1	—	1	1	—	1	—	—	—
Compound Honey ..	1	—	1	1	—	1	—	—	—
Arrowroot ..	1	—	1	1	—	1	—	—	—
Condensed Full-Cream Milk ..	2	—	2	2	—	2	—	—	—
Epsom Salts ..	3	—	3	3	—	3	—	—	—
Self-raising Flour ..	1	—	1	1	—	1	—	—	—
Grape Fruit Squash ..	1	—	1	1	—	1	—	—	—
Pepper ..	1	—	1	1	—	1	—	—	—
Lime Juice Cordial ..	1	—	1	1	—	1	—	—	—
Malt Vinegar ..	1	3	4	1	3	4	—	—	—
Bicarb. of Soda ..	1	—	1	1	—	1	—	—	—
Jelly Crystals ..	1	—	1	1	—	1	—	—	—
Pork Sausage ..	1	—	1	—	—	—	1	—	1
Bacon ..	—	2	2	—	2	2	—	—	—
Glycerine ..	—	1	1	—	1	1	—	—	—
Camphorated Oil ..	—	1	1	—	1	1	—	—	—
Aspirin Tablets ..	—	3	3	—	3	3	—	—	—
Sweetening Tablets ..	—	1	1	—	1	1	—	—	—
Ham ..	—	1	1	—	1	1	—	—	—
Boric Acid ..	—	1	1	—	1	1	—	—	—
Preserved Sausage ..	—	1	1	—	1	1	—	—	—
Rum ..	—	1	1	—	1	1	—	—	—
Cod Liver Oil ..	—	1	1	—	1	1	—	—	—
TOTALS ..	486	871	1357	469	868	1337	17	3	20



The following table shows the average percentage of fat and solids not fat in milk samples (formal and informal) analysed by the Public Analyst each month during 1946 :—

Month.	No. of Samples.	Average Percentage of Fat.	Average Percentage of Solids not Fat.
January .. ..	90	3·638	8·918
February .. ..	85	3·620	8·900
March .. ..	79	3·541	9·043
April .. ..	83	3·577	8·909
May .. ..	87	3·481	8·897
June .. ..	71	3·408	8·903
July .. ..	81	3·493	8·877
August .. ..	55	3·445	8·805
September .. ..	80	3·693	8·893
October .. ..	107	3·678	8·907
November .. ..	78	3·671	8·884
December .. ..	74	3·578	8·895
AVERAGE ..	88·3	3·568	8·902

The standard for milk under the Sale of Milk Regulations 1939, is Fat 3·0 per cent. and Solids not Fat 8·5 per cent.

Of the 145 informal samples of milk which were tested by the inspectors during the year by the Gerber process, 6 or 4·1 per cent. were found to be adulterated.

**Samples taken formally and found to be not genuine.**

1 Milk deficient in fat .. ..	7·0 per cent.
1 do. .. ..	13·0 do.
1 do. .. ..	14·0 do.
(and deficient in solids not fat 4·0 per cent—2 cases)	
1 Milk with added water .. ..	13·3 per cent.
1 Milk deficient in fat .. ..	5·0 do.
1 do. .. ..	4·0 do.

1 Milk with added water	..	..	3·0 per cent.
1 do.	..	..	3·0 do.
1 do.	..	..	1·0 do.
1 do.	..	..	7·0 do.
1 Potted Meat Paste deficient in meat content			0·3 do.
1 Pork Sausage,	do.	do.	11·4 do.
1 Beef Sausage,	do.	do.	8·0 do.
1 Potted Meat Paste,	do.	do.	30·9 do.
1 do.	do.	do.	25·5 do.
1 do.	do.	do.	32·4 do.

**Samples taken informally and found to be not genuine.**

1 Milk deficient in fat	..	..	6·0 per cent.
1 do.	..	..	10·0 do.
1 Milk added with water	..	..	4·4 do.

**Action in the case of Adulterated Samples.**

(a) *Legal Proceedings*.—In the following instances legal proceedings were instituted with the results shown :—

Sale of milk containing added water	}	Fined £5 and £4 13s. 6d. costs.
(7 samples)		
Sale of milk containing		
added water 3·0 per cent	}	Fined £2 in each case and £1 11s. 6d. costs.
Do. 3·0 per cent		
Do. 13·3 per cent		Dismissed under Probation Act and both defendants ordered to pay 16/6d. costs.

(b) *Other Action*.—In the following instances legal proceedings were not instituted but the persons concerned were cautioned by the Health Committee :—

- Sale of milk deficient in fat 14% and deficient in solids not fat 4%.
- Sale of milk containing added water 1%.
- Sale of milk containing added water 5% (producer subsequently prosecuted).
- Sale of milk deficient in fat 5%.

**Fertilizers and Feeding Stuffs Act 1926.**

The Table below shows the Samples taken under the above Act in 1946 :—

**Fertilizers.**

	Satisfactory.	Un-satisfactory.	Total.
National Gromore Fertilizers	2	1	3
Steamed Bone Meal ..	1	—	1
Superphosphate of Lime ..	1	2	3
Sulphate of Ammonia ..	5	—	5
Dried Blood Fertilizer ..	2	—	2
General Purpose Fertilizer ..	2	1	3
Nitrate of Soda .. ..	3	—	3
Basic Slag .. ..	—	1	1
	16	5	21

**The Pharmacy and Poisons Act 1933.**

This Act permits the Sale of Poisons in Part 2 of the Poisons List by persons whose names and premises are entered in the Local Authority's list. During 1946, 89 applications for entry in the list were received, and after inquiry and inspections, 84 were approved and 5 were refused.

**MATERNITY AND CHILD WELFARE.**

*Dr. I. McD. Harkness, Senior Medical Officer of Maternity & Child Welfare reports as follows :—*

The Maternity and Child Welfare Staff is made up of the following medical, nursing and clerical personnel :—

**Medical Staff.**

Six full-time medical officers.

**Non-medical Staff.**

Superintendent Health Visitor.

Two assistant supervisors of midwives.

Sixteen health visitors.

One health visitor with special Ophthalmic duties.

Thirty-two midwives.

Nine full-time and one part-time clerk.

Eight nursery matrons and staffs.



In common with other such sections of Health Departments throughout the country the Maternity and Child Welfare section has suffered very considerably from lack of staff throughout. Great difficulty is being experienced in replacing any member of the staff who may leave. This is bound to have adverse repercussion upon the service as a whole particularly as the birth rate shows sign of rising steeply. The health visiting sub-section particularly is likely to suffer most as it continues caring for the children over a period of years. Makeshift housing accommodation such as houses let in lodgings to families with children under five years means constant moving from one such house to another which in turn adds to the health visitor's difficulty in tracing and following up such families. So often these families stand most in need of supervision lest we add numerically to the problem family so frequently met with to-day. The health visitor goes on working under difficult circumstances and meeting with insufficient recognition of the value of her work. The domiciliary midwifery staff continues to work under extreme pressure. The health of many midwives is being undermined by frequent night calls and overwork by day. It has been found necessary to take such measures as cutting down the number of visits paid during the puerperium to reserve the strength of the midwives. Only in this way can the patient be sure of as efficient care as is possible just now.

Nursery staffs are dangerously depleted particularly of trained personnel. We are attempting to assist the local Education Department in training nursery nurses in order that a supply may be available in the shortest period of time possible under the new training regulations.

### The Domiciliary Midwifery Service.

As already stated this service is carried on by an overburdened and overworked staff. Long illness in several midwives is responsible for further depletion. 647 cases more than in 1945 were delivered by midwives in the homes of patients in 1946. Emergency midwifery forms 2% of the work done by domiciliary midwives. These emergency cases are due to those women who make no provision whatsoever for the birth of the child. Occasionally they come in from surrounding towns but more often they just do not make provision either for care at the birth or for clothing the infant.

### City Midwives.

The work done by City Midwives is summarised in the following table :—

1.	The number of cases delivered as midwives	..	2,941
2.	„ „ „ „ „ maternity nurses		295
3.	„ „ „ „ „ Emergency	..	68
4.	„ „ „ medical aids sent to doctors—		
	(a) for mothers	.. ..	629
	(b) for babies	.. ..	124
5.	The number of stillbirths occurring in cases under 1		42
6.	(a) The number of notifications of death of baby in cases under 1	.. .. ..	34
	(b) The number of notifications of death of baby in cases under 2	.. .. ..	1
7.	The number of notifications of Artificial Feeding	..	78
8.	„ „ „ „ to be a source of Infection	.. ..	20
9.	„ „ „ Postnatal visits to mothers	..	53,407
10.	„ „ „ Antenatal „ „	..	13,943
11.	„ „ „ Special „ „	..	2,350

**Midwives.**

The supply of midwives during 1946 in the area is as follows :—

The total number of midwives who notified intention to practise throughout the year 1946				..	..	129
Total number practising in the area at the end of 1946				..		110
(a)	Number employed by L.S.A.		Domiciliary	..		32
			In Hospital	..		41
(b)	„	„	„	Nursing Homes and Co-operations		.. .. 14
(c)	„		„	Voluntary Associations—		
				Domiciliary	.. ..	1
				In Hospital	.. ..	16
(d)	Total in private practice			..	.. ..	6

**Medical Assistance for Midwives.**

			City Midwives.	Private Midwives.	Nursing Homes.
For Mother	..	..	629	82	15
For Child	..	..	124	5	7
Fees paid to medical practitioners for assistance to midwives during 1946 amounted to					
	..	..			£1,004 3s. 0d.

**Ophthalmia Neonatorum.**

Number of cases notified	..	..	..	124
Total number of visits paid to homes in connection with eye disease in infants	..	..	..	2,536

**Puerperal Pyrexia.**

Cases notified	..	..	..	..	50
The number of visits made to homes in connection with Puerperal Pyrexia	..	..	..	..	16



### Maternal Mortality.

There were seven maternal deaths in the city giving a maternal death rate of 1·09 as compared with 1·24 for England and Wales.

- (a) Three were due to sepsis.
- (b) Four were due to other causes.

Of the (a) sepsis group. One was associated with procured abortion, one with gas gangrene in delayed labour and one was of generalised septicæmia associated with premature labour.

Of the (b) group two were cases of ruptured ectopic pregnancy, one was of obstetrical shock following retained placenta and the other was cerebral hæmorrhage following Cæsarean Section.

### X-Ray Facilities for Expectant Mothers.

The number of cases referred from the Consultant Clinic 58

### Record of Visits by Supervisors.

The Record of Visits by Supervisors of Midwives and Staff is as follows :—

Visits to Expectant Mothers	..	..	..	169
„ Post-natal Mothers	..	..	..	162
Visits to cases of Still Birth	..	..	..	27
„ „ Puerperal Pyrexia	..	..	..	16
„ „ Eye conditions in infants			..	2,536
„ „ Pemphigus in infants	..	..	..	10
„ „ Other skin conditions in infants			..	19
„ Premature Infants	..	..	..	10
„ Nursing Homes	..	..	..	11
Visits and Inspections of midwives		..	..	162

7,277 Priority Dockets for Sheets were issued to 2,425 Expectant Women.

**Puerperal Pyrexia.**

Disease.	Cases Notified	Admitted to Hospital.	Cases arising in Hospital	Deaths.	Notification Age Groups.			
					15-20	20-25	25-35	35-45
Puerperal Pyrexia ..	50	13	30	0	2	18	21	9

**Ophthalmia Neonatorum.**

Cases Notified.		Treated.		Vision Unim- paired.	Vision Im- paired.	Total Blind- ness.	Deaths
Domiciliary Confinements	Institutional Confinements	In Hospital	At Home				
109	15	30	94	124	—	—	—

**Ante-Natal and Post-Natal Clinics.**

Clinic.	No. of Sessions.	New Patients.	Return Visits.	Post Natahs.	Total Attend- ances.	(Approx.) Average per Session.
Aspley ..	98	551	2,479	38	3,068	31·3
Bulwell ..	51	442	1,575	23	2,040	40
Basford ..	50	379	1,549	46	1,974	39·5
Edwards Lane	49	275	1,205	50	1,530	31·2
Huntingdon Street ..	100	922	3,226	42	4,190	41·9
Radford ..	150	1,077	4,232	127	5,436	36·2
Sneinton ..	100	740	3,088	41	3,869	38·6
Wilford Road	101	576	2,353	54	2,983	29·5
Consultant Clinic ..	699	4,962	19,707	421	25,090	35·8
	50	527	332	(30)	859	17

### NURSING HOMES.

During 1946 one new registration of a maternity nursing home with five beds was granted. Two registrations were cancelled. At 31st December, 1946, there were eleven homes on the register providing 47 maternity beds and 25 others. In all 47 visits of inspection were paid by an assistant medical officer of health and an assistant supervisor of midwives.

#### Home for Unmarried Mothers, 1 & 95 Queen's Drive.

The matron, Mrs. Bayley, reports that during the year 22 expectant mothers and 14 mothers with babies were admitted. Of these 33 were discharged. The work of this home is again handicapped by staffing difficulties. The average stay of expectant mothers is 9 weeks while the average stay of mother with a baby is  $10\frac{2}{3}$  weeks.

The day nursery at 95 Queen's Drive continues to fill a much needed function in this part of the city. Under two years old children made 5,011 attendances while two to five year old children made 4,605 attendances—a total of 9,616.

Cases of Infectious disease were not numerous and gastro-enteritis was not present.

#### Health Visiting.

Primary Visits	..	..	..	..	5,895
Re-visits under 1 year	..	..	..	..	18,148
					<hr/> 24,043
Other visits under 1 year	..	..	..	..	2,878
					<hr/> 26,921
					<hr/> <hr/>
Re-visits 1 year-5 years	..	..	..	..	35,691
Other visits	..	..	..	..	4
					<hr/> 35,695
					<hr/> <hr/>



**Total attendances at Infant Welfare Centres.***Total attendances of new cases :—*

(a)	Children up to 1 year	..	..	..	4,036
(b)	Children from 1-5 years	..	..	..	142
	(55 1-2 years, 87 over 2 years).				

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 4,178
 

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**Total attendances of all babies up to 5 years.**

(a)	Children up to 2 years	..	..	..	58,722
(b)	Children from 2-5 years	..	..	..	4,720

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 63,442
 

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**Total number of sessions held during 1946.**

(a)	Infant Clinics	..	..	..	1,037
(b)	Toddlers' Clinics	..	..	..	283

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 1,320
 

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Number of sessions held weekly .. .. . 27

**ATTENDANCES AT CENTRES, 1946.**

CENTRE.	Infant Session.	New Cases.	Attend- ances.	Average Attendance.
Aspley .. ..	148	477	7,283	49·2
Basford .. ..	50	287	4,957	99·1
Bulwell .. ..	99	317	5,163	52·2
Edwards Lane ..	99	335	5,731	57·9
Huntingdon Street ..	96	371	4,497	46·8
Hyson Green ..	97	425	5,610	57·8
Jarvis Avenue ..	49	213	3,601	73·5
Lenton Abbey ..	49	69	1,148	23·4
Radford .. ..	150	672	9,644	64·3
Sneinton .. ..	100	496	5,280	52·8
Wilford Road ..	100	429	5,808	58·0

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1,037	4,091	58,722	—
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**Toddlers.**

CENTRE.	No. of Sessions.	New Cases.	Attendances.	Average Attendance.
Aspley .. ..	45	—	849	18·8
Basford .. ..	21	6	329	15·7
Bulwell .. ..	23	13	420	18·3
Edwards Lane ..	48	10	765	15·9
Huntingdon Street ..	22	10	332	15·1
Hyson Green ..	—	4	37	—
Jarvis Avenue ..	27	12	452	16·7
Lenton Abbey ..	—	1	44	—
Radford .. ..	50	5	849	17·0
Sneinton .. ..	22	25	337	15·3
Wilford Road ..	25	1	306	12·2
	283	87	4,720	—

**Child Life Protection, 31st December, 1946.**

Cases on the Register, 31st December, 1945 .. ..	140
„ Registered during 1946 (including 31 N.H.) ..	119
„ Removed from Register during 1946 .. ..	139
„ on the Register 31st December, 1946 .. ..	120

The 139 cases removed are made up as follows :—

1. Given into the care of parents or relatives ..	44
2. Adopted .. ..	79
3. Social Welfare Committee .. ..	2
4. Education Committee .. ..	—
5. To other local Authorities .. ..	3
6. Died .. ..	1
7. Cases removed from the Register on attaining the age of 9 years .. ..	10
	139

Number of visits paid to homes by Health Visitors in connection with the above Act .. .. .	813
Visits to institutions .. .. .	5
Number of interviews at Health Department .. .. .	55
Number of foster mothers on register plus 1 institution with 37 children .. .. .	82
Pending adoption .. .. .	44
Office interviews concerning adoption .. .. .	301

**Adoption of Children Section 7 of the Adoption of Children  
(Regulation) Act, 1939.**

(a) Number of persons who gave notice under Section 7(3) during the year .. .. .	77
(b) Total number of children in respect of whom notice was given under Section 7(3) .. .. .	77
(c) Number of children notified under Section 7(3) :—	
(1) Under supervision at the end of the year ..	32
(2) Who died during the year .. .. .	1
(3) On whom inquests were held during the year	1
(d) Particulars of any proceedings taken during the year	Nil

**INFANT MORTALITY.**

A new record has been established in the city so far as the infant mortality rate is concerned. The rate of 42·4 per 1,000 live births is the lowest ever recorded and is lower than that for England and Wales—namely 43—and for the 126 County Boroughs and Great Towns including London—namely 46.

In all there were 265 deaths of which the neo-natal group numbered 139—52·4% of the total infant deaths. It is difficult to assess the degree of emphasis which should be laid upon each known factor in the lowering of the infant mortality rate but one cannot fail to realise how great has been the effect of the priority food schemes for



children under 5 years and the expectant mother. The proper distribution of the resources of our national larder is largely responsible. Midwives, health visitors and doctors, hospital and clinics have all contributed by educational work among parents and guardians.

In the neo-natal group of deaths prematurity, atelectasis and congenital malformations, in that order, are responsible for 67% of the deaths while in the group from one month to one year Pneumonia is the chief cause of death being responsible for 54% of the total number.

#### ORTHOPÆDIC REPORT, 1946.

New Cases	..	..	..	..	300
Total attendances	..	..	..	..	3,918
Appliances provided	..	..	..	..	137
X-ray examinations	..	..	..	..	41
Cost of Out-patients	..	..	..	..	£353 8s. 3d.
„ Splints	..	..	..	..	£171 0s. 4d.
„ Boots	..	..	..	..	£27 8s. 5d.
„ X-ray	..	..	..	..	£27 11s. 3d.
Individual attendances	..	..	..	..	653
In-patient cost	..	..	..	..	£302 4s. 6d.
In Hospital at 31st December, 1945	..	..	..	..	2
Admissions during 1946	..	..	..	..	5
Discharged during 1946	..	..	..	..	7
In Hospital at 31st December, 1946	..	..	..	..	—

#### DAY NURSERIES.

The position in nurseries is that all have long waiting lists and few staff. It is to the credit of those small overworked staffs that there has been so little infection among the children.

Four students sat the examination of the National Society of Children's Nurseries, and three were successful.

Two nurseries were handed over to the Education Department in March 1946. In all there are eight day nurseries. Three of these had fairly severe measles infection—50% of the children attending being affected in each nursery.

The total attendances were as follows :—

Children 0 - 2	..	..	23,674
„ 2 - 5	..	..	37,517
			<hr/>
Total	..	..	61,191
			<hr/> <hr/>

#### **BIRTH CONTROL.**

The arrangement continues by which the Corporation gives official recognition to the private organization under the name of the Women's Welfare Centre. Sessions are held on Mondays, 2 to 4.30 p.m., at the Methodist Church, Shakespeare Street (side entrance Shakespeare Villas).

Women attending municipal clinics and needing birth control instruction, on the grounds that further pregnancies would be detrimental to health, are referred to this clinic.

During the year 122 women were given forms of recommendation by various Health Committee clinics or hospitals, and 96 took advantage of this arrangement.

#### **HOME HELP SCHEME.**

During the period January to December 1946, the Home Help Scheme has become much more widely known. Enquiries are received from doctors, hospital almoners, The Blind Institution, Nursing Association, School Welfare Officers, Social Welfare, Clinics, etc., in addition to the numerous private applications. The

service is very greatly appreciated by Old Age Pensioners and expectant mothers, particularly as in these austerity days it is impossible for every case to be taken into Maternity hospitals, or for help to be obtained to run the home and care for other small children until the mother is well enough to do so herself.

Help has also been given to a number of cases introduced by the Almoners of the General, and City Hospitals, thus enabling patients to leave hospital much earlier than would have been possible if Domestic Help had not been available. At the same time releasing beds for incoming patients, a great help during these days of overcrowding. Doctors too make good use of the Scheme, particularly in cases where a person lives alone and help is urgently needed immediately to cook meals, do shopping etc., and care generally for the sick person.

Applications received during 1946 numbered 451.

Help given to Domestic Cases .. ..	237
Help given to (Confinements) Home Cases	26
	<hr/>
Total .. ..	263
	<hr/> <hr/>
*Remission cases—Domestic .. ..	49
„ „ —Home .. ..	3

\*Reimbursement claimed from the Ministry of Health in these cases.

Most of the Remission cases were Supplementary Pensioners to whom no charge was made. Other cases paying varying amounts from 1/- to 30/- per week.

40 Helps were on the Register working on an average of 60 cases weekly.



Of the remaining 158 applications, at least 50 were from outside the City boundary and were refused. Approximately 40/50 were future bookings for confinement cases. Of the remainder a few refused help, some have gone to hospital or gone to live with relatives.

## **NURSING.**

### **District Nursing.**

District Nursing is supplied by voluntary nursing associations aided by grants from the Health Committee. It is the policy of the Health Committee to ensure that the entire City is reasonably well supplied with such nurses, and to this end the grants have been increased from time to time to enable the associations to extend their work. There is now very little of the area which is not within the normal "beat" of a district nurse, and no district where a district nurse cannot be obtained by emergency arrangements.

The general shortage of nurses is felt in respect of district nurses, but married women working from their own homes on behalf of the associations have enabled the service to be maintained.

The scheme for district nursing under the National Health Service Act 1946 is being prepared and this should result in further development of the service at the expense of the Corporation, who in time may expect to bear most of the cost, as voluntary subscriptions gradually fall off—a likely contingency. The association which receives the largest grant and successfully covers by far the widest area is the Nottingham District Nursing Association. Other societies with which the Corporation is happily co-operating are :—

Bulwell Nursing Association.  
 Wollaton, Trowell & District Nursing Association.  
 Beeston & District Nursing Association.  
 Bilborough Nursing Association.  
 Basford Nursing Association.

The last of these is a local collecting agency for the Nottingham District Nursing Association, which does the work. There is an association in the Carrington area which receives no grant ; this is a branch of the activities of St. John's Church.

#### **Civil Nursing Reserve.**

This war-time organisation is still being maintained but on a greatly reduced scale, for peace-time purposes.

#### **Agencies for the Supply of Private Nurses.**

Such agencies are subject to licensing by the Corporation, under Part 2 of the Nurses Act 1943. Two agencies exist in the City, both are licensed, and both are being carried on to the satisfaction of the Health Department.

### **ALMONERS' DEPARTMENT.**

*Report by the Chief Almoner, Miss M. Benham, A.M.I.A.*

There have been no real changes in the structure of the almoners' department during the year, though the work has been badly restricted by shortage of staff. Differences from previous years lie more in the changes brought by the end of the war, changes in the social habits and economy of the population, which must alter the environment of ill-health, and so effect the nature of the medico-social work needed.

There is, for example, rather less difficulty over the care of children in the mother's absence now that so many husbands have come back, and less likelihood of

the housewife having to return home to cope unaided with house and children. The problems of illegitimate births are changing with the departure of service personnel from abroad, and the return of our own demobilised men. The housing shortage is of course a serious obstacle, and it is sadly illogical to send a patient home from hospital to his previous conditions when the doctor has stated that he can only complete his recovery in a less overcrowded house, in a reasonably dry structure, in a different locality, or in a ground floor flat instead of his present one on the 3rd floor; despite exploring every possibility and contacting every likely agency, there is very little we can do. Suitable conditions of employment are perhaps more hard to find than in the previous year: the Disabled Persons Act, now in full operation, is undoubtedly helpful for orthopædic cases; the "medical" case remains a less attractive proposition to the employer.

At the City Hospital, the turnover is very large, and each almoner must "cover" a great number of patients suffering from very different diseases. Plans for helping the elderly patient, with no friends and relatives, who must decide whether to maintain his or her home, or whether to dispose of it, have been worked out in new detail with the Town Clerk's Department and with the advice of the Social Welfare Department. The re-employment of patients discharged from the wards is well worth more individual follow-up, and this we hope to develop, particularly when more medical follow-up clinics are held.

The almoner sees all long-stay patients in the wards, with a view to arranging some occupational interest for them. The "star" case of the year was the girl who



took school certificate despite being recumbent on account of a tuberculous spine, and reached matriculation standard with seven credits and one distinction.

Plans for patients on discharge are complex. Sixty-five were sent to various convalescent homes as compared with fifty-three in 1945.

More adequate accommodation is urgently needed for the almoners at the hospital.

The end of the war has affected the almoner's work at the V.D. clinic in that notifications under Regulation 33B have greatly diminished, and the problems caused by soldiers from other countries have lessened with their departure. We were without the part-time services of an assistant almoner at the clinic during the early part of the year, and again since September, and shortage of almoner staff confronts us with a problem: we have no doubt that every new patient should see the almoner on first attendance but one almoner cannot be present at 10 sessions weekly as well as visit and carry out the general work of the department. 228 visits have been paid as compared with 282 in 1945, and in these considerable priority has had to be given to early syphilitic cases and those coming under Regulation 33B. Notts. County almoners have been very helpful in visiting patients resident in that area.

The almoner has attended a number of interesting meetings in London regarding the almoner's place in an ideal V.D. unit.

At the Tuberculosis Clinic, many of the men coming on to the Allowance Scheme are now recently demobilised servicemen. Pension awards are slow in coming through

so they have the immediate service of the Tuberculosis Allowance and its attendant reduction in the price of milk while waiting. Rates for dependent children were raised in December 1946 to the scheme for Assistance Board and similar cases ; Family Allowances unfortunately have to be deducted. The number of patients assisted by the scheme remains approximately the same.

The Staff Care Conference considered 396 families during the year, and provided for varied needs as in 1945. There seems to have been more concern than previously with domestic needs : for the sick man living alone, for the housecleaning and laundry of the housewife who must rest, for the care of the advanced case dying at home. Also for child patients, for some of whom we have tried to arrange better surroundings while awaiting admission. More sanatorium beds would be the proper solution to many of these problems.

Women having home confinements and unable to pay the fees have been seen at the Heathcoat Street Office as before, and reductions made in 181 cases. The new dental scheme for expectant mothers involves some work in connection with the supply of dentures. As I have of necessity spent the main part of my time at the Tuberculosis Clinic, particularly in the latter part of the year, it has been difficult to give sufficient time to the Prevention of Blindness cases and the few general cases referred from various sources. I regret this very greatly, because it is only with considerable care and visiting that the best results can be obtained for these patients. As stated elsewhere, cases accepted for the Prevention of Blindness Scheme have been more numerous and more

varied in type this year than last, and have not only involved operative treatment. There has been contact with the Royal Midland Institution for the Blind, and representation of the Medical Officer of Health on the Institution's Welfare Committee as in 1945.

We now take students, and during the year have had one Social Science student from University College, Nottingham, for a three week period, and three students from the Institute of Almoners for a part of their practical training, one for two months and two for three months each.

### **CITY HOSPITAL AND THE FIRS.**

*Medical Superintendent*—W. MORTON, M.D.

*Deputy Medical Superintendent and Physician*—  
SIDNEY B. BENTON, M.R.C.S., L.R.C.P.

*Pathologist in charge of E.M.S. Area Laboratory at the City Hospital*—  
ANTHONY H. JOHNS, M.A., M.B., B.Ch., F.R.C.S.E.

*Resident Obstetrician and Gynæcologist*—  
JOHN B. COCHRANE, M.B., Ch.B., M.R.C.O.G.

4 *Assistant Medical Officers.*

9 *House Physicians and Surgeons.*

### **Visiting Medical Staff.**

*Physicians*—

DR. P. H. O'DONOVAN, M.D., F.R.C.P.  
DR. R. J. TWORT, B.A., M.D., M.R.C.P.  
DR. W. S. WHIMSTER, M.D., M.R.C.P.

*Physician for Tuberculosis*—

DR. J. V. WHITAKER, M.B., Ch.B., D.T.M., D.P.H.

*Surgeons*—

MR. F. C. HUNT, M.B., B.S., F.R.C.S.E.  
MR. J. SWAN, M.B., F.R.C.S.E.  
MR. J. LLEWELLYN DAVIES, B.A., M.B., F.R.C.S.



*Orthopædic Surgeons—*

MR. F. CROOKS, M.B., M.Ch., F.R.C.S.E.  
MR. A. N. BIRKETT, F.R.C.S.

*Ear, Nose and Throat Surgeon—*

MR. E. J. GILROY GLASS, M.B., F.R.C.S.E., D.L.O.

*Obstetrician and Gynæcologist—*

MR. H. J. MALKIN, M.D., F.R.C.S.E., F.R.C.O.G.

*Dermatologist—*

DR. A. D. FRAZER, M.D., D.P.H.

*Thoracic Surgeon—*

MR. G. MASON, M.B., F.R.C.S.

*Venereologist—*

DR. R. MARINKOVITCH, M.D.

*Ophthalmic Surgeon—*

DR. J. C. MUSTARDE, M.B., D.O.M.S.

*Psychiatrist—*

DR. D. MACMILLAN, B.Sc., M.D., F.R.C.P.E., Dipl. Psych.

*Anæsthetists—*

DR. I. SPARK, M.B., B.Ch.  
DR. J. BUCKLEY, B.A., M.B., B.Ch., D.A.

*Radiologist—*

DR. W. J. MOWAT, M.D., D.R.

*Dental Surgeon—*

MR. R. G. L. COE, L.D.S.

*Matron*—MISS D. ANNAKIN, S.R.N., S.R.F.N., S.C.M.

*Deputy Matron*—MISS A. HOLDER, S.R.N., S.R.F.N., M.S.R.

*Matron (The Firs)*—MISS M. HOOLEY, S.R.N., S.C.M.

*Steward*—MR. F. C. LANSDOWN.

*Chief Pharmacist*—MR. D. H. S. COX, M.P.S.

*Almoner*—MISS J. C. BARTON, A.M.I.A.

*Superintendent Physiotherapist—*

MISS U. M. POYSER, C.S.P., M.E., L.E.T.

*Catering Manager*—MR. R. E. M. DAVIS.

**City Hospital Establishment.**

Assistant Matron .. ..	1	Cooks .. ..	2
Midwifery Superintendent ..	1	Assistant Cooks .. ..	5
Night Superintendent ..	1	Kitchen Porters .. ..	3
Sister Tutors .. ..	3	Linen Storekeeper .. ..	1
Home Sisters .. ..	3	Assistant Storekeeper .. ..	1
Departmental Sisters ..	2	Seamstresses .. ..	8
Ward Sisters .. ..	38	Teachers .. ..	2
Male Charge Nurses ..	4	Ambulance Drivers .. ..	3
Male Staff Nurses .. ..	2	Chief Porter .. ..	1
Male Student Nurscs ..	30	Sterilizing Porter .. ..	1
Staff Nurses .. ..	30	Mortuary Porter .. ..	1
Student Nurses .. ..	168	Dispensary Porters .. ..	2
Midwifery Pupils .. ..	34	Clothing Porter .. ..	1
Civil Nursing Reserve ..	15	Lodge Porters .. ..	4
Housekeeper .. ..	1	Gate Porters .. ..	2
Assistant Housekeeper ..	1	General Porters .. ..	34
Deputy Steward .. ..	1	Bath Attendants .. ..	2
Medical Supt's Secretary ..	1	Window Cleaners .. ..	2
Clerks and Typists .. ..	21	Telephone Operators .. ..	4
Deputy Pharmacist .. ..	1	Garden Labourers .. ..	3
Assistant Pharmacist .. ..	1	General Labourers .. ..	6
Dispensers .. ..	3	Female Clothing Attendant ..	1
Pharmaceutical Student ..	1	Canteen Cook .. ..	1
Physiotherapists .. ..	2	Canteen Assistants .. ..	4
Laboratory Technicians ..	5	Maids .. ..	22
Radiographers .. ..	1	Female Ward Orderlies ..	56
X-ray Pupils .. ..	1	Male Orderlies .. ..	9
Chef .. ..	1	Cleaners .. ..	116
Assistant Chefs .. ..	9		

**The Firs Maternity Hospital Establishment.**

Sister Tutor .. ..	1	Typist .. ..	1
Midwifery Sisters .. ..	4	Cook .. ..	1
Staff Midwives .. ..	7	Assistant Cook .. ..	1
Pupil Midwives .. ..	17	Maids .. ..	7
Assistant Nurses .. ..	2	Chief Porter .. ..	1
Daily Cleaners .. ..	5	Porters .. ..	3
Ward Orderlies .. ..	7	Maintenance Engineer ..	1
Laundry Workers .. ..	2	Gardeners .. ..	3
Seamstress .. ..	1	Stokers .. ..	3

### CITY HOSPITAL.

*Dr. W. Morton, who entered upon his duties as Medical Superintendent on 20th September, supplies the following report on the work of the City Hospital and the Firs Maternity Hospital :—*

The demands of the Services for hospital accommodation have steadily decreased during the year and for the first time since 1938 the hospital has dealt mainly with civilian patients. It is therefore of interest to compare figures for the past year with figures of the pre-war years 1937 and 1938, and from this comparison to obtain an indication of the demands which the City Hospital will be called upon to meet during the next few years.

#### Comparison of Statistics for the years 1937, 1938 and 1946.

	1937.	1938.	1946.
1. Total number of admissions .. ..	5,274	5,953	7,492
2. Born in hospital .. ..	413	562	1,350
3. Average duration of stay :— ..			
(a) Under 4 weeks .. ..	3,386	4,088	6,711
(b) 4 weeks and under 13 weeks ..	1,559	1,790	1,685
(c) 13 weeks and over .. ..	659	684	458
4. Number of Surgical Operations ..	1,107	1,464	2,900

The total number of admissions is increased, the number of babies born is almost trebled, the number of operations is more than doubled. This general increase is entirely due to the change occurring in the types of cases admitted, for the numbers of cases of more chronic illness (3, *b* and *c*) show no significant alteration, whereas many more acute cases (i.e. 3*a*—“under 4 weeks”) have been admitted. In other words the “turn over” has become much more rapid, and it is likely that this trend will continue for some years to come.



It is not easy to adapt buildings originally intended for the accommodation of the chronic sick and infirm patients to the needs of a general hospital dealing mainly with acute illness. The original structure of the hospital, apart from some minor additions and alterations has not been altered to meet the changing demands. Plans for a great new hospital could not be carried through during the years of war, nor does it seem likely that any major building scheme will be possible for some years to come.

So, the immediate policy must be one of expediencies, minor alterations and temporary additions, whilst planning goes on for future major developments. The most pressing and immediate need is for additional operating theatres. The present theatre accommodation was inadequate for the surgical work performed in 1938 ; how much more inadequate it is today.

The Maternity Department is unsuitable and overcrowded. This should be given high priority as soon as it is possible to embark on a new building programme. There are many other pressing needs, some of which can be met by modification of the present buildings, some of which will have to wait for more propitious times.

Increase in turnover has necessitated increase in staff. In 1937 the full time Medical Staff was seven, in 1946 seventeen doctors were employed full time, and there is a large panel of visiting specialists. The Committee intend to increase still further the medical staff especially at specialist level.

In addition to the need for more nurses to cope with the changing character of the work of the hospital, still more are required because of the great reduction in hours of work for all grades of nursing staff. The City Hospital

like almost every hospital in the country has not sufficient nurses. Moreover the new home built in 1939, which is one of the most modern and best equipped of nurses' homes, could not accommodate the numbers of nurses needed, should these numbers become available. The problem may be solved partly by the employment of part time nursing staff and of more domestic staff, but only partly solved.

Clerical staff has also been considerably augmented. More patients mean more documentation and the Committee have felt that doctors and nurses should not be called upon to assume the additional burden of clerical work.

Statistical tables showing the work done in the hospital are given. Included in these are tables for the Maternity Department and for the Thoracic Surgery Unit, both of which have had to meet greatly increased demands.

Special units such as the Thoracic Surgical Unit are essential in order that specially skilled treatment is available for certain groups of diseases. Other special units may be needed in the future. Nevertheless, the majority of patients admitted come under the headings of General Medical or Surgical Cases and the welfare of the majority must not be forgotten. Every effort is being made to improve the amenities for the patients, to make their stay in hospital as cheerful and as comfortable as possible, and to abolish needless restrictions. Many patients on admission to hospital feel lonely and cut off from their friends and relatives. To overcome this, visiting is now permitted each evening of the week and on Sunday afternoons (except in the Children's Wards). This concession has been greatly appreciated both by patients and by their relatives and friends.

Although hampered by supply difficulties every effort is made to give the patients a varied and nutritious dietary. A copy of the menu for a week is shown.

In 1948 the hospital will pass from the control of the Council and become State owned. The interim period must be one, not of waiting, but of progress. Even after the appointed day the hospital will continue to serve the needs of the people of Nottingham, and it is hoped that they will continue, not without some pride, to call it the CITY HOSPITAL.

## Training of Nurses.

There is a well equipped preliminary training school where student nurses spend the first three months receiving tuition and training in the theory and practice of nursing. At the end of this period they begin training on the wards. The Preliminary Examination is taken at the end of the first year and the Final State Examination at the end of the third year of training.

The examination results for the year are as follows :—

### 32 Student Nurses passed the Final State Examination.

15           ,,         ,,         ,,         Part I and Part II Preliminary  
Examination.

2            „         „         „         Part I Preliminary Examination.

15                   "                   "                   "                   Part II                   "                   "

## Beds.

Total number	..	..	..	..	1,020
--------------	----	----	----	----	-------

Allocation of beds :—

Male Medical	..	..	..	..	168
--------------	----	----	----	----	-----

Female Medical	..	..	..	214
----------------	----	----	----	-----

Male Surgical	..	..	..	..	104
---------------	----	----	----	----	-----

Female Surgical	..	..	..	136
-----------------	----	----	----	-----

Children Medical	..	..	..	60
------------------	----	----	----	----

Children Surgical	..	..	..	60
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Maternity and Gynæcology .. .. 163

” ” ” Cots . . 71

Specialised Wards (T.B., V.D., Skin) .. 115

1,020      71



**Averages for the Year.**

Beds—Average daily number occupied	..	..	764
Admissions—Average daily number	..	..	24·22

Duration of stay of patients :—

Under 4 weeks	..	..	..	6,711
4 weeks and under 13	..	..	..	1,685
13 weeks or more	..	..	..	458
				<hr/>
				8,854
				<hr/>

Maximum number of beds occupied—21st March, 1946	..	875
Minimum number of beds occupied—25th September, 1946		662

**Statistical Table for the Year ended 31st December, 1946.**

Remaining in hospital, January 1st	..	..	695
Admitted	..	..	7,492
Born in hospital	..	..	1,350
			<hr/>
			9,537

Discharged	..	..	..	8,009
Deaths	..	..	..	845
				<hr/>

Patients treated to a conclusion	..	..	8,854
Remaining in hospital, 31st December, 1946	..		683

**Comparative Table for Three Years.**

	1944.	1945.	1946.
Admissions	9,188	7,914	7,492
Births	1,148	1,110	1,350
Deaths	573	703	845
Admissions—Average Daily Number	28·24	24·72	24·22
Operations performed	3,713	2,755	2,900

**Surgical Operations.**

Total number                    ..                    ..                    ..                    ..                    2,900

	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total.
General Surgery ..	73	103	99	68	92	84	89	71	55	85	97	67	983
Orthopædic ..	20	12	17	3	7	12	12	19	7	14	16	10	149
<i>Thoracic Surgery.</i>													
Major chest operations	4	2	7	3	8	10	10	4	6	5	14	11	84
Bronchoscopy and bronchogram ..	14	15	22	15	15	17	27	19	12	19	22	12	209
Gynæcological ..	43	49	61	35	60	44	67	48	46	41	48	24	566
Obstetrical ..	5	11	33	23	24	26	35	29	27	22	36	15	286
Ear, nose and throat	40	4	24	62	17	51	46	54	24	65	48	25	460
Genito-urinary ..	26	12	7	15	13	13	10	11	8	9	13	14	151
Ophthalmic ..	—	—	—	—	—	—	—	—	—	—	2	10	12
Total per month ..	225	208	270	224	236	257	296	255	185	260	296	188	2,900

**Dental Department.**

Extractions under :—

Local anæsthesia	..	..	..	1,457
General	„	..	..	496
Gas	„	..	..	12
Total number of extractions				1,965
Fillings	..	..	..	12
Scaled and cleaned	..	..	..	33
Dentures supplied	..	..	..	26
„ replaced	..	..	..	4
Jaw wire replacements or repairs	..	..	..	3

**Blood Transfusion Department.**

Number of Donor Sessions held at the City Hospital	43
Number of people bled .. .. .	1,897

**X-ray Department.**

Total number of Investigations .. .. .	7,144
Civilian In-Patients .. .. .	4,949
Tuberculosis Clinics and Sanatoria ..	649
Outside Institutions .. .. .	268
Gynæcological Out-Patients .. .. .	149
Military In-Patients .. .. .	598
Military Out-Patients .. .. .	531
	———— 7,144

**Massage Department.**

Number of treatments given :—

	Massage.	Electrical	Ultra Violet Ray.	Infra Red Ray.	Exercises	Total.
Civilian ..	1,021	424	2,052	1,439	8,577	13,513
Military ..	779	691	119	820	1,928	4,337
	1,800	1,115	2,171	2,259	10,505	17,850

**THORACIC SURGERY UNIT.**

192 patients were admitted during 1946.

Patients were admitted from :—

City .. .. .	133	} Male 116 ; Female 76.
County .. .. .	54	
O.H.M.S. .. .. .	1	
Derby County .. .. .	2	
Private .. .. .	2	



**Operations performed.**

Pneumonectomy	..	..	..	16
Lobectomy	..	..	..	28
Exploratory Thoracotomy		..	..	13
Bronchoscopy	..	..	..	136
Bronchogram	..	..	..	98
Removal of Mediastinal Cysts or Tumours	..			3
Diaphragmatic Hernia		..	..	1
Drainage Lung Abscess	..	..	..	1
Exploration of Sinus	..	..	..	1
Œsophagoscopy	..	..	..	1
Removal of Foreign Body		..	..	1
Rib Resection (Empyema)		..	..	10

**Pathological Laboratory.**

The E.M.S. Area Laboratory at the City Hospital continued during 1946 to serve the City Hospital and other hospitals in the area. Requests from Military Encampments and R.A.F. stations have been greatly reduced but there has been a corresponding increase in the demands for investigations on civilian patients.

During 1946 about 20,000 specimens were examined. The Laboratory staff now undertake all routine examinations, including morbid histology and section cutting. 12 specimens were sent to Sheffield for Consultant's opinion.

The new extensions to the laboratory have been completed and the additional space and equipment have made it possible to increase the range and scope of the investigations undertaken.

## Menu for Week Ending 22nd December, 1946.

MEAL.	MONDAY.	TUESDAY.	WEDNESDAY.	THURSDAY.	FRIDAY.	SATURDAY.	SUNDAY.
BREAKFAST	Porridge. Boiled Haddock.	Porridge. Bacon and Saute Potatoes.	Porridge. Fried Sausages and Brown Gravy	Porridge. Fried Egg or Haslett. Marmalade.	Porridge. Fried Sausages and Gravy.	Porridge. Kippers.	Porridge. Boiled Bacon. Marmalade.
DINNER.	Hot-Pot, Swedes, Creamed Potatoes. _____ Flaked Barley Pudding.	Grilled Fish, Cabbage and Creamed Potatoes. _____ Steamed Apple Pudding and Custard.	Corned Beef, Patties, Haricot Beans, Creamed Potatos, Onion Gravy. _____ Semolina Pudding.	Roast Beef, Cabbage, Roast Potatoes. _____ Milk Jelly.	Grilled Fish, Peas, Creamed Potatoes. _____ Bread Pudding and Custard.	Fried Sausages, Fried Onions, Creamed Potatoes. _____ Apple Charlotte, Sweet White Sauce.	Roast Beef, Cauliflower, Creamed Potatoes. Yorkshire Pudding. _____ Junket.
TEA.	Bread & Scones with Jam.	Potted Meat & Watercress.	Bread & Scones with Jam.	Buns.	Potted Meat with Celery.	Bread & Scones with Jam.	Cake.
SUPPER.	Soup. _____ Cheese & Celery. _____ Bread. _____ Coffee.	Soup. _____ Veal & Ham Pies, Beetroot—Bread. _____ Coffee.	Soup. _____ Luncheon Sausage _____ Bread. _____ Coffee.	Soup. _____ Cheese & Potato Pie. _____ Bread. _____ Coffee.	Soup. _____ Boiled Tripe & Onions. _____ Bread—Coffee.	Soup. _____ Polony & Beetroot. _____ Bread—Cocoa.	Soup. _____ Fish Pie — Bread _____ Coffee.

**OBSTETRIC DEPARTMENT, CITY HOSPITAL.**

*(Report submitted by Mr. J. B. Cochrane, M.B., Ch.B., M.R.C.O.G.,  
Resident Obstetrician and Gynæcologist).*

As was anticipated, the obstetric department was called upon to deal with a greatly increased number of cases for the past year. This was mainly due to the rising birth-rate and to the lack of domestic facilities and the shortage of houses.

The total number of admissions to the department was 2,371, an increase of 53% over that of 1945 and the total number of births, 1,415, live and still-births inclusive, an increase of 21%.

75% of the total births were spontaneous, the remaining 25% being assisted deliveries. This shows a decrease in spontaneous deliveries of 7% as compared with 1945, but this figure should not be regarded as of any material significance.

There were three maternal deaths, giving a return of .21%, as compared with one death in 1945, or .085%. Only one of the three was a booked case, and the cause of death was the unusual one of acute hæmolytic anæmia of pregnancy. In her only previous pregnancy, this condition had manifested itself, but a spontaneous abortion at mid-term had occurred and this probably was the factor involved in her recovery, although her condition was extremely grave at that time.

The other two maternal deaths occurred in women admitted as emergencies and both died from sepsis, one probably from hæmolytic streptococcal infection due to



acute tonsillitis, although this was not satisfactorily proved, and the other from gas-gangrene infection of the uterus due to prolonged labour.

Stillbirths numbered 53, one less than in 1945, but this actually showed a substantial decrease of  $\cdot 87\%$  in view of the increased number of births in 1946, the actual percentage being 3.74 to 4.61.

Infant deaths within ten days of birth totalled 45, an increase of 16, over 1945. Prematurity, with or without any superadded condition sufficient to cause death, was present in 33 cases as compared with 18 last year, giving a comparison of 73.3% to 62%.

This increase in deaths among premature babies can be explained by the policy adopted over the past year of admitting all women in premature labour, upon request from the medical practitioner or midwife, in the same manner as any other obstetric emergency condition. This naturally resulted in an increase in the number of premature labours and in addition a number of the infants were born so prematurely that their hopes of survival were negligible.

Admissions for antenatal care totalled 956, an increase of 49, and attendances at the antenatal clinics, 10,509, an increase of 2,932, while postnatal visits, in all 982, showed an increase of 132.

With regard to the number of pupil midwives undergoing Part One training under the C.M.B. rules, this showed a decrease of eight, but of the total number of 27, 25 passed the examination, giving a pass percentage of 92.5, as compared with 83 in 1945.

Several features with regard to the work of the department are considered worthy of especial mention ; viz. :—

**“ The Flying Squad ”.**

This, as its name implies, is a mobile emergency unit available at all times at the request of the medical practitioner, midwife or maternity nursing home, to render obstetric aid to the patient on the spot. Each year since its inception the number of emergency calls has been increasing and this year has yielded the highest total so far, 34 in all.

The existence of this service for the City, it is felt, is not yet universally appreciated and mention is made here of its existence and availability at all times in order that full use of this service can be made.

**Premature Labour.**

In order to try and combat the high death rate among premature infants, the department sought the admission of women in premature labour, in order that the confinement could be conducted in hospital and, by so doing, obviating the journey after birth of the premature infant to hospital, as this journey was considered to be a major factor in the high mortality among such infants. This offer to admit such cases continues, as the survival rate of these premature babies has risen very appreciably since its inception.

**Breast-Milk Bank.**

A bank of stored breast-milk is kept at this hospital and is maintained by patients in hospital and after they have been discharged home. It is a tribute to the whole-hearted interest and support of these patients that this service continues and the milk bank, as well as catering

for the very extensive demands made upon it by the department itself in respect of its premature babies, can also cater for any outside infants for whom breast-milk is essential.

### **Mass Radiography.**

For the last seven months of this year, all pregnant women attending the department's antenatal clinics were referred to the Mass Radiography Chest Centre, for examination. The response was excellent; there were no defaulters. The value of this examination is of paramount importance, and affords the clinician at the antenatal clinic positive evidence of the state of the chest in all expectant mothers.

### **The RH Factor.**

The occurrence of certain blood diseases in the new-born due to this factor has been receiving much publicity in the popular press. The only effective treatment is by transfusion of a certain type of blood unaffected by the sequelæ of this factor. This certain type of blood unfortunately only occurs in some 15% of the population. As only about half of these 15% are available as blood donors, an appeal is made on behalf of these affected infants for all potential donors to enrol now, in order that the very high mortality among these babies can be reduced without further delay.

The following tabulated summary outlines the main statistical features of the work for the past year.

A detailed statistical account of the year's work has also been prepared and is available for perusal on request at the Health Department.



	1946.	1945.
Total admissions .. ..	2,371	1,549
„ births .. ..	1,415	1,170
„ Live births .. ..	1,362	1,116
„ Stillbirths .. ..	53	54
Maternal deaths .. ..	3 (.21%)	1 (.085%)
Infant deaths within 10 days ..	45	29
Total number of abortions ..	182	222
„ „ Cæsarean Sections	71	67
„ „ Forceps deliveries	106	90
„ „ Breech deliveries	75	41

## ANTENATAL CARE.

Number of cases booked ..	1,277	1,044
„ „ seen and not booked	524	360
Subsequent antenatal visits ..	8,708	6,173
Total .. ..	10,509	7,577

## POSTNATAL CARE.

Initial visits .. ..	780	—
Subsequent visits .. ..	202	—
Total .. ..	982	859

## PUPIL MIDWIVES.

Number of pupils undergoing Part I training under C.M.B. regulations .. ..	27	35
No. successful at first attempt ..	22	24
„ „ second „ ..	3	5
„ who failed after second attempt or did not enter second time .. ..	1	6
Total number of pupils passed ..	25 (92.5%)	29 (83%)

### THE FIRS MATERNITY HOSPITAL.

This annexe of the parent City Hospital, is conducted as a separate Part 2 Training School, under the Central Midwives Board Regulations, in conjunction with the Municipal Domiciliary Midwifery Service, which provides the district part of the training for the midwifery pupils.

The general shortage of hospital accommodation for parturient women, was also reflected in the work of this hospital this year, by an increase of 16·6% in the total number of admissions, and of 14·1% in the number of births over the figures for 1945.

Of the 703 births in the hospital, 88·6% or 623, were spontaneous, this high figure being mainly due to the policy of admitting only booked cases to this hospital, and referring emergency admissions to the City Hospital.

One maternal death occurred during the year, giving a return of ·14% as compared to ·162% in 1945. The cause of death was syncope following delivery in a patient just recovering from a severe attack of influenza.

Stillbirths numbered 24, 5 more than last year, and gave a percentage of 3·41 as against the previous years' 3·08.

Infant deaths within ten days of birth, were 16 ; 8 more than in 1945, or 2·27% to 1·3%.

Attendances at the Antenatal Clinics totalled 7,245, an increase of 908 over those of 1945, while Postnatal visits numbered 903, an increase of 288.

From the Antenatal Clinics, 359 women were admitted specifically for antenatal care, as compared with 242 the previous year.

The number of pupil midwives who undertook the Part 2 Training, was 33, an increase of 5. All successfully passed the examination, giving a percentage of 100, as compared with the previous year's 89·3%.

A complete statistical survey of the year's work has been compiled and the following figures represent the salient features from it :—

	1946.	1945.
Total admissions .. ..	869	745
„ births .. ..	703	616
„ Live births .. ..	679	597
„ Stillbirths .. ..	24	19
Maternal deaths .. ..	1 (·14%)	1 (·162%)
Infant deaths within 10 days ..	16	8
Total number of Cæsarean		
Sections	35	25
„ „ „ Forceps		
deliveries	40	44
„ „ „ Breech		
deliveries	16	7
ANTENATAL CARE.	1946.	1945.
Number of cases booked ..	755	770
„ „ „ seen and not		
booked	690	462
Subsequent antenatal visits ..	5,800	5,105
Total .. ..	7,245	6,337



POSTNATAL CARE.		1946.	1945.
Initial visits	.. ..	781	505
Subsequent visits	.. ..	122	110
		<hr/> 903 <hr/>	<hr/> 615 <hr/>

#### PUPIL MIDWIVES.

Number of pupils undergoing Part 2 training under C.M.B. regulations .. ..				33	28
No. successful at 1st attempt ..				31	24
,, ,, ,, 2nd ,, ..				2	—
,, who failed after second attempt or did not enter for 2nd time .. ..				—	3
,, who passed at 3rd attempt after refresher course ..				—	1
Total number of pupils passed ..				33 (100%)	25 (89·3%)

### PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

#### NOTIFIABLE DISEASES.

*This Report is presented by Dr. T. A. Don, Medical Superintendent of the City Isolation Hospital, who also acts as head of the Infectious Diseases section of the Health Department.*

The following table shows the number of cases, (including suspected cases), of notifiable infectious disease reported to the Medical Officer of Health during the year 1946. As will be seen from this table the diagnosis in a small percentage of cases was subsequently amended either by the notifying medical practitioner or by the medical staff of the City Isolation Hospital :—

**Table (Civilians only).**

Disease.	Notifications.	Final numbers after correction.
Scarlet Fever .. ..	358	321
Whooping Cough .. ..	416	413
Acute Poliomyelitis and Polioencephalitis .. ..	3	3
Measles .. ..	1,298	1,298
Diphtheria .. ..	131	44
Acute Pneumonia .. ..	252	252
Dysentery .. ..	16	10
Smallpox .. ..	—	—
Acute Encephalitis Lethargica ..	—	—
Enteric Fever or Typhoid Fever ..	3	—
Paratyphoid Fevers .. ..	—	—
Erysipelas .. ..	73	70
Cerebro-spinal Fever .. ..	34	14

**CITY ISOLATION HOSPITAL, NOTTINGHAM.**

The relatively small number of 706 new Fever cases were admitted for treatment during 1946, compared with 1,274 and 1,237 cases during 1945 and 1944 respectively. As 91 patients remained from 1945, the total number treated during the year was 797. Of this number no less than 765 were treated to a final conclusion whilst 32 still remained in hospital on 31.12.46. In view of the shortage of nursing staff experienced during the year this decrease in the number of admissions was a fortunate occurrence.

The various diseases treated in the Isolation Hospital were as follows :—

**Smallpox.**

Nottingham was entirely free from smallpox during 1946.

**Scarlet Fever.**

273 cases or suspected cases of scarlet fever were admitted for treatment during 1946, the diagnosis being confirmed in 240 of this total. No deaths occurred from the disease '*per se*' or from its complications. As in recent years the prevailing type of Scarlet Fever was again mild in character. It is now generally agreed that home isolation of mild cases of scarlet fever is to be preferred to hospitalisation if the patient can have a suitable bedroom to himself. The present shortage of nursing and domestic staffs in Isolation Hospitals has forced this realisation upon many local authorities. Uncomplicated clean cases of scarlet fever were detained in hospital for 3 weeks only. Only one scarlet fever patient, a girl of 6 years, required surgical treatment on account of a mastoid complication.

**Diphtheria.**

There were only 53 confirmed cases of diphtheria (all types) admitted to the hospital in 1946. This is the lowest number of diphtheria cases on record. 92 other persons who had been sent into hospital notified as suffering from, or suspected to be suffering from, diphtheria, were subsequently proved to have a condition other than diphtheria; 11 of the 53 confirmed cases had been immunized under the ægis of the diphtheria immunization scheme, and all were mild cases and soon responded to treatment. There were 5 fatal diphtheria cases, however, during the year but none of these had been immunized. Since the inception of the diphtheria immunization scheme



in October 1940, not a single death has occurred in Nottingham in an immunized person ! In common with other cities and towns the remarkable fall in the number of cases of diphtheria here in Nottingham within the past 3 to 5 years is undoubtedly due in great measure to the large number of persons (mainly children) who have undergone the process of immunization against this lethal complaint. However, the unimmunized person (and particularly the pre-school and school child) is in just as much danger today as before the immunization scheme was commenced, and cannot expect any individual benefit from the fact that most of his fellows are protected from diphtheria and its often fatal complications. It is quite possible that some parents or guardians of such unprotected children may be under the impression that the need for immunization is not quite so pressing now as in war-time. This is not the case. Every endeavour must be made to MAINTAIN the present high percentage of immunized pre-school and school children here in Nottingham. We would suggest that the most suitable age for a child to undergo the necessary protective treatment is between the ages of 9 and 12 months.

**Diphtheria Table.**

Ages.	Cases.	Deaths.	Mortality per cent.	Numbers Immunized.
Under 1. year .. ..	1	—	—	—
1—2 years .. ..	3	1	33·3	—
2—5 years .. ..	3	—	—	—
5—10 years .. ..	11	1	9·09	4
10—20 years .. ..	16	2	12·5	10
Over 20 years .. ..	19	1	5·3	—
TOTALS .. ..	53	5	9·4	14

CITY ISOLATION HOSPITAL—1946.

DISEASE.	Remaining at end of 1945.			Admitted 1946.			Total Cases during 1946.	Total Cases finally dealt with in 1946.	Total deaths during 1946.	Case mortality % of Total Cases in 1946.	Days of average residence.		Remaining at the end of 1946.
	Sex.	No. of Patients.	Recovered.	Died.	No. of Patients.	Recovered.	Died.				Non-Fatal.	Fatal.	
Scarlet Fever ..	M.	16	16	..	101	100	..	117	116	..	..	..	1
	F.	25	25	..	139	130	..	164	155	..	..	..	9
Totals ..		41	41	..	240	230	..	281	271	..	20·1	..	10
Enteric Fever ..	M.	..	..	..	..	..	..	..	..	..	..	..	..
	F.	..	..	..	1	1	..	1	1	..	..	..	..
Totals ..		..	..	..	1	1	..	1	1	..	7	..	..
Diphtheria ..	M.	10	10	..	27	22	3	37	35	3	..	..	2
	F.	12	12	..	26	22	2	38	36	2	..	..	2
Totals ..		22	22	..	53	44	5	75	71	5	6·6	57·4	4
Smallpox ..	M.	..	..	..	..	..	..	..	..	..	..	..	..
	F.	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..		..	..	..	..	..	..	..	..	..	..	..	..
Other Cases ..	M.	15	12	3	212	186	17	227	218	20	..	..	9
	F.	13	12	1	200	182	9	213	204	10	..	..	9
Totals ..		28	24	4	412	368	26	440	422	30	6·8	17·7	18
TOTALS ..		91	87	4	706	643	31	797	765	35	4·4	22·8	32

Enteric Fever.

There were no cases of typhoid or paratyphoid fever during 1946. A known female paratyphoid ‘ B ’ carrier was admitted on account of another complaint which necessitated a hospital stay of only 7 days. She declined to remain in hospital on account of her paratyphoid carrier state for urgent domestic reasons and she was given special instructions on how to eliminate the danger of infecting others.

**Meningococcal Meningitis (Cerebro-spinal Fever).**

There were 11 cases of this infection, (7 males and 4 females) with one death which occurred in a boy aged 2 years who died less than 1 hour after admission.

**Tubercular Meningitis.**

8 cases of this highly fatal form of meningitis ; all died.

**Acute Anterior Poliomyelitis and Polio Encephalitis.**

One case of acute poliomyelitis occurred in a boy aged 7 years who died 4 days after admission.

**Erysipelas.**

Only 4 cases of this infection were treated in 1946. All recovered.

**Acute gastroenteritis in Infants.**

40 cases were admitted during 1946, 20 male and 20 female infants. There were 6 deaths, (4 male and 2 female). In quite a number of these gastroenteritis cases, the intestinal symptoms were undoubtedly secondary to parenteral infections (upper respiratory tract infections, e.g. otitis media, Bronchopneumonia, etc.). In very few instances were positive findings forthcoming in spite of intensive bacteriological investigations in the remainder.

**Bronchopneumonia in Infants.**

15 cases in all were treated, having been admitted on suspicion of suffering from an infectious complaint. 5 of these cases terminated fatally.

**Measles.**

40 cases were admitted to hospital, most of them with complications. There were no deaths.



**Whooping Cough.**

Altogether 29 cases of this infection were admitted to hospital. There were 3 deaths.

**Other Cases.**

In addition to the above specified diseases, 264 other cases were admitted during 1946.

**Service Cases dealt with during 1946.**

Scarlet Fever	..	..	..	7
Rubella	..	..	..	7
Diphtheria	..	..	..	6
Mumps	..	..	..	6
Measles	..	..	..	5
Streptococcal Tonsilitis		..	..	8
Chickenpox	..	..	..	4
Glandular Fever	..	..	..	4
Acute Lymphocytic Choriomeningitis			..	1
Meningococcal meningitis		..	..	1
Erysipelas of Face	..	..	..	1
Enteritis (unknown ætiology)		..	..	1
Vincent's angina	..	..	..	1
Psychosis (?)	..	..	..	1
Nil Infections Found		..	..	1
Diagnosis Doubtful	..	..	..	1
				<hr/> 55 <hr/>

**Sanatorium Ward.**

37 beds were available on Ward 6 for the treatment of female pulmonary tuberculosis cases and the average daily number occupied was 35. These tubercular patients are under the medical care of the Tuberculosis Officers who pay daily visits. During 1946, 75 new admissions were received of which 15 died.

**SKIN CLINIC.**

*Dr. A. D. Frazer, Director of the Clinic, reports as follows :—*

The Skin Clinic has again had a very busy year. The number of patients was 6,684 and they made 33,041 attendances for treatment.

1. Scabies is still on the decrease. The numbers for the years 1943 onwards are as follows :—

6,070, 3,455, 2,996, 2,650.

The indications are that this fall is continuing in 1947.

2. Pyogenic skin conditions—these include such conditions as Impetigo, Sycosis, Infections of the hairs of the scalp, etc. There were 1,530 patients falling to this category. These react quickly and favourable to daily dressings.
3. Patients harbouring lice totalled 201. The rapid treatment with DDT Emulsion is still being used and proves successful in every case.
4. Patients with skin conditions other than the above number 2,303. This is an increase for this group of 453 over the previous year. These patients are referred by their own doctors and exhibit all varieties of skin disease. If daily dressings are not required, treatment is arranged at home through their doctors and the patients attend the Clinic from time to time.

Many seriously ill patients are seen and they are admitted to the City Hospital without delay. When hospital treatment is no longer necessary, they are kept under observation as Out Patients at the Skin Clinic, thus ensuring continuity of care.

**TUBERCULOSIS.**

*This report is contributed by Dr. J. V. Whitaker,  
Tuberculosis Officer.*

During 1946 the Tuberculosis Sub-Committee decided to remove two of the four "bottle necks" which had been referred to in the Annual Report for the previous year—the inadequate accommodation and the inadequate medical staffing at Forest Dene.

The adjoining premises at Greendale House are now no longer required by the Venereal Diseases Department and in consequence of this it has been decided to merge them with the Forest Dene premises. The whole block will in future be known as "Forest Dene".

Since Forest Dene has now become quite well known amongst the medical practitioners in the city and also amongst their patients there will be obvious advantages in retaining the old title. It is intended in future to omit the word "Tuberculosis" from the notice board in the garden upon which it has hitherto appeared. An appreciable number of the patients dealt with are nervous and apprehensive—especially upon the occasion of their first visit—so that it will obviously be advantageous to do this. This would be in conformity with practice in other large centres and it would also be consistent with the fact that between two thirds and three quarters of all the patients dealt with do not suffer with tuberculosis although an appreciable number of these patients do exhibit other non-tuberculous conditions of the chest.



Arrangements are already in hand for combining the premises by making four openings in the main dividing wall—two on the ground floor and two on the first floor. In the first instance it is intended to utilise only the ground and first floors of the adjacent premises and three new fireplaces will comprise the only structural additions which will be necessary.

These arrangements will secure the immediate use of the following additional accommodation for both patients and staff :—

Two medical officers rooms.

Two patients' waiting rooms.

Two rooms for housing records and stores.

The existing X-ray room and processing room at Forest Dene will be retained for their present purpose but the medical officers' room on the first floor (hitherto used by Dr. Tozer) will become solely a "Treatment Room".

In addition to accommodating an additional medical officer it will be possible to provide adequate and separate waiting room accommodation for male and female patients.

Although at the time of writing this report they are of no immediate concern, possible developments which are envisaged in the future may comprise the appointment of a fourth medical officer and of a laboratory technician. The new premises would suffice to accommodate this possible additional staff.

With the assistance of the third full time medical officer it will become possible considerably to improve the working time table of the clinic. The "snowballing" of arrears of correspondence on the tuberculosis officer's desk should cease. It will be possible to arrange three pneumothorax refill sessions each week instead of the two sessions each week held at present. This is urgently necessary because the tuberculosis officers commonly encounter 30-35 pneumothorax or pneumoperitoneum patients per session at the present time. Such large numbers of patients are not desirable since hasty work may predispose to errors in technique with consequences very serious for the patient. A maximum of twenty five patients per session is desirable.

During the year the Tuberculosis Sub-Committee also recommended the provision of a modern four valve X-ray installation at Forest Dene. This would be equipped with a rotating anode tube and a tomograph and it would be housed in the existing X-ray room. With such an installation it would be possible to obtain films of the finest quality and comparable with those now being obtained at Newstead and at the Mass Radiography Centre. It would also become possible to obtain comparable serial films of the same patient at intervals of months or even years. This cannot be done with the existing installation which has very frequently been out of order during the past two years and which is in any case ten years old. The tomograph to be provided at a fractional additional cost will be of great advantage to the tuberculosis officers and the thoracic surgeon in assessing progress and in determining and locating cavities and other abnormalities in the lungs.

At the Isolation Hospital Sanatorium the year has seen the revival of an old technique—that of therapeutic pneumoperitoneum. At the time of writing this report six in-patients at the Isolation Hospital are undergoing this treatment—all of them in conjunction with a phrenic crush and two of them in conjunction also with an artificial pneumothorax. Most of the patients so treated have progressed satisfactorily and in two instances the tuberculosis officers are of the opinion that this mode of treatment has obviated the more heroic and more drastic procedure of thoracoplasty which latter involves the surgical removal of portions of several of the ribs. Therapeutic pneumoperitoneum was first used by Spencer Wells the English Gynæcologist in 1872 for the treatment of tuberculous peritonitis. During the first two decades of the present century its use for peritonitis and other abdominal conditions was fairly common. The possibility of using this treatment for pulmonary tuberculosis was first realised in 1931 in America.

During the latter part of the year the Tuberculosis Officer has devoted much time to obtaining figures in connection with the employment of tuberculous patients under sheltered conditions. This work has been done in conjunction with the Disabled Persons' Employment Corporation Limited, and in connection with the Corporation's scheme for the establishment of a suitable factory in the North Midland Region. The following table contains the figures for the City of Nottingham. The figures given are only approximate and in the case of female patients it is emphasized that they are necessarily somewhat nebulous by reason of marriage, pregnancy, and the care of the home and children :—



City of Nottingham Tuberculosis Clinic. Employment under Sheltered Conditions of Tuberculous Patients on the Clinic Register.						
Age Group.	Number of T.B. positive already employed but for whom sheltered conditions should be provided.		Number of T.B. negative as in previous column.		Number of tuberculous cases positive and negative not employed but who are employable under sheltered conditions.	
	Males.	Females.	Males.	Females.	Males.	Females.
15—25	9	4	47	50	55	57
26—35	13	9	22	24	38	26
36—45	23	3	22	9	38	10
46—55	11	0	11	8	44	1

During the year an address was given to the Disablement Rehabilitation Officers at the Employment Exchange, Castle Boulevard. It is intended that this contact with the Rehabilitation Officers shall be further strengthened.

Our association with the Nottingham University College has been fully maintained—the University class of Social Science students this year again comprising thirty-six members.

### **Tuberculosis Statistics.**

#### **Work of the Tuberculosis Clinic—"Forest Dene"—1946.**

Number of persons on the clinic register 1/1/46	2,317
New patients examined during the year excluding contacts . . . . .	1,757
Contacts examined during the year . . . . .	578
Cases returned after having been lost sight of and cases transferred from other areas . . . . .	66
<i>Add</i> . . . . .	—
	<hr/> 2,401
	4,718

Cases written off the register as " recovered " ..	94	
Patients written off as found to be non-tuberculous or notified in error ..	1,764	
Transferred to other areas or lost sight of ..	111	
Deaths .. .. .	191	
<i>Subtract</i> .. .. .	—————	2,160
Number of persons on the clinic register 31/12/46 ..		<u>2,558</u>

	Pulmonary	Non-Pulmonary	Total
A. New Cases (excluding contacts).			
(a) Definitely tuberculous ..	465	83	548
(b) Diagnosis not completed ..	—	—	—
(c) Non-tuberculous .. ..	—	—	1,764
B. Contacts.			
(a) Definitely tuberculous ..	23	—	23
(b) Diagnosis not completed ..	—	—	—
(c) Non-tuberculous .. ..	—	—	555
C. Cases written off the register as :—			
(a) Recovered .. ..	82	12	94
(b) Non-tuberculous including cases notified in error and cancelled .. ..	—	—	1,764
D. Number of cases on the clinic register 31/12/46 .. ..	2,280	278	2,558
Number of consultations with Medical Practitioners :—			
(a) Personal .. .. .	..	..	?
(b) Other (in writing) .. ..	..	..	2,110
Number of visits by Tuberculosis Officers to homes including personal consultations at homes ..			106
Number of visits by Health Visitors to homes ..			6,619
Number of attendances by patients at the clinic for :—			
(a) Examinations .. ..	3,803		
(b) X-ray .. ..	3,571		
(c) Treatment .. ..	2,328		
 Total attendances ..	<u>9,702</u>		

Number of X-ray films obtained at clinic	..	..	3,571
Number of X-ray screen examinations made	..	..	2,071
Specimens sent to the laboratory	..	..	650
Blood sedimentation tests carried out	..	..	145

### Analysis of Cases on Clinic Register on 31st December, 1946.

Type.		Pulmonary.				Non-Pulmonary.				Total.	Grand Total.
		Adult.		Child.		Adult.		Child.			
		M.	F.	M.	F.	M.	F.	M.	F.		
Class T.B.											
Minus	..	764	808	145	118	—	—	—	—	1,835	
Class T.B.											
Plus	..	159	271	1	14	—	—	—	—	445	
Non-											
pulmonary		—	—	—	—	66	66	69	77	278	
										—	2,558

### Analysis of Treatment given at " Forest Dene ".

#### 1. Artificial Pneumothorax.

Number of Patients in attendance on 31.12.46.				Number of Attendances.		Total Attendances.
M.	F.			M.	F.	
52	57			951	1,377	2,328

### Summary of Tuberculosis Statistics.

#### TUBERCULOSIS DEATH-RATE (NOTTINGHAM).

Ten years' average 1936-45—

Respiratory only	..	..	0·77
All forms of Tuberculosis	..	..	0·91

For 1946—

Respiratory only	..	..	0·62
All forms of Tuberculosis	..	..	0·72

NEW CASES (including primary notifications, cases not notified during life but first intimated by death returns, and transfers from other areas) :—

Pulmonary :	Males 311	Females 246
Non-pulmonary :	„ 43	„ 59

DEATHS.

Pulmonary :	Males 101	Females 74
Non-pulmonary	„ 13	„ 15



**Analysis of Patients admitted to Institutions during the year 1946.***Newstead Sanatorium :*

Males ..	..	127	} Pulmonary.
Females..	..	106	
Children	..	40	
		<hr/> 273 <hr/> <hr/>	

*City Isolation Hospital :*

Females..	..	75	Pulmonary.
		<hr/> 75 <hr/> <hr/>	

*City Hospital :*

Males ..	..	24	} Pulmonary.
Females..	..	5	
Children	..	12	
		<hr/> 41 <hr/> <hr/>	
Males ..	..	42	} Non-Pulmonary.
Females..	..	45	
Children	..	13	
		<hr/> 100 <hr/> <hr/>	

*Outside Sanatoria :*

Males ..	..	2	} Pulmonary.
Females..	..	—	
Children	..	6	
		<hr/> 8 <hr/> <hr/>	
Males ..	..	1	} Non-Pulmonary.
Females..	..	1	
Children	..	16	
		<hr/> 18 <hr/> <hr/>	

## **NEWSTEAD SANATORIUM.**

*Dr. G. O. A. Briggs, Medical Superintendent, reports as follows :—*

### **New Wards.**

Since May 1946 one new prefabricated ward has been opened for the accommodation of 26 children—mostly cases of primary Tuberculosis who were diagnosed on contact examination of our adult patients.

A second ward still remains unoccupied because of shortage of staff.

### **Laboratory.**

The Technician is now employed full-time at the Sanatorium. As the existing Laboratory proved too small for the work being carried out, it was closed, and a larger Laboratory was constructed from an unused room. As had been anticipated, the value of having first class Laboratory work done on the spot has proved quite invaluable. Practically all pathological investigations are done at the Sanatorium; the only exceptions so far being Biological tests, which are carried out by the Sheffield Health Department, and Wassermann Reactions, which are done at the City Laboratory.

### **Occupational Therapy.**

One full-time and one part-time Therapist are now employed. The growth of this most valuable work has caused the present temporary accommodation to become unhealthily cramped. The room originally designed as a shampoo room, but little used for this purpose, is therefore being converted to make an Occupational Therapy room, large enough and well enough fitted out for the work to be carried out properly.

**Nurses' Home.**

Work has now commenced on a hut extension to the Nurses' Home ; to accommodate 10 Nurses.

**Grounds.**

A hard tennis court has been constructed and it had been hoped to commence laying out the grounds. This, however, unfortunately proved impossible.

**Bus Shelter.**

A bus shelter, the need for which has been long felt, has been erected at the Sanatorium entrance.

**Admissions and Discharges.**

Remaining on December 31st, 1945	..	178
Admitted	.. .. .	273
Discharged—		
Classified cases	.. .. .	217
Observation cases found to be non-tuberculous		5
Died	.. .. .	26
		<hr/>
Total Discharged and Deaths	.. .. .	248
Remaining on December 31st, 1946	..	203

**Artificial Pneumothorax.**

New Cases induced	.. .. .	89
Refills	.. .. .	3,355

**Artificial Pneumoperitoneum.**

New Cases induced	.. .. .	5
Refills	.. .. .	25

**Other Treatment.**

Aspiration	.. .. .	106
Bronchogram	.. .. .	1
Mantoux Test	.. .. .	63
Gold Injection	.. .. .	3
Diphtheria Immunization	.. .. .	23
Monaldi Drainage	.. .. .	1
Oleothorax	.. .. .	4
Miscellaneous	.. .. .	43



**Thoracic Surgery (at the County General Hospital, Worksop and Ransom Sanatorium, Nr. Rainworth).**

Thoracoscopy .. .. .	62
Phrenic Avulsion .. .. .	7
Phrenic Crush .. .. .	10
Thoracoplasty, stage 1 .. .. .	3
Thoracoplasty, stage 2 .. .. .	3
Bronchoscopy .. .. .	1

**Dental Clinic.**

Examinations .. .. .	220
Extractions .. .. .	171
Fillings .. .. .	201
Scaling .. .. .	48
Dentures .. .. .	6
Prothesis .. .. .	33
Multiple Extractions .. .. .	1

**Ear, Nose and Throat Clinic.**

Examinations .. .. .	155
----------------------	-----

**Ophthalmic Clinic.**

Examinations .. .. .	50
----------------------	----

**X-ray Department.**

Chest films .. .. .	2,038
Bronchograms .. .. .	1
Bone and Joint Films .. .. .	23
Abdominal films .. .. .	2
Contact films .. .. .	159
Staff films .. .. .	303
Total .. .. .	2,526
Screenings .. .. .	3,685

**Contacts.**

Total X-rayed .. .. .	159
Normal .. .. .	86
Under observation .. .. .	49
Healed Pulmonary Tuberculosis .. .. .	9
Active Pulmonary Tuberculosis .. .. .	15
Other Disease .. .. .	—
New Cases .. .. .	85

**Laboratory.****Bacteriology—(T.B.).**

			Positive.	Negative.	Positive Per Cent.
Sputa, Direct Smears	..	..	783	977	45·5
Cultures	..	..	20	64	24
Gastric Juice, Direct Smears	..	..	2	16	11·1
Cultures	..	..	10	115	8
Pleural Fluids, Direct Smears	..	..	14	18	45
Cultures	..	..	6	11	30·5
Urines, Direct Smears	..	..	9	19	33
Cultures	..	..	4	13	19·5
Pus, Direct Smears	..	..	8	9	49
Cultures	..	..	3	6	33
Fæces, Direct Smears	..	..	—	3	—
Cultures	..	..	1	4	20

**Bacteriology—(General).**

Throat Swabs for :—

Diphtheria	..	..	—	56	—
Vincent's	..	..	—	12	—
Hæmolytic Streptococci	..	..	—	25	—
Other Swabs	..	..	3	51	5·5
Smears, Miscellaneous	..	..	5	26	16·5
Cultures	..	..	2	6	25
Penicillin Sensitivity Tests	..	..	2	—	100

**Hæmatology.**

					Total.
Colour Indices	..	..	..	..	47
Total Red Cell Counts	..	..	..	..	47
Total White Cell Counts	..	..	..	..	62
Differential White Cell Counts	..	..	..	..	586
Hæmoglobin Estimations	..	..	..	..	375
Blood Sedimentation Rates	..	..	..	..	1,512
Bonsdorff—Houghton Indices	..	..	..	..	515
Blood Grouping	..	..	..	..	4

**Biochemistry.**

					Number.
Blood Sugars	..	..	..	..	10
Blood Ureas	..	..	..	..	2
Blood Promanide Estimations	..	..	..	..	3
Serum Calciums	..	..	..	..	10
Van Den Berghs	..	..	..	..	1
Protein Estimations—Pleural Fluid	..	..	..	..	1

**Miscellaneous Examinations.**

	Number
Urine—Chemical Examinations .. .. .	57
Deposits .. .. .	57
Total Number of Examinations done during the year ..	5,592
Biological Examinations (Sheffield Health Department)	94

**MASS RADIOGRAPHY.**

*Dr. A. E. Beynon, Medical Director, Chest Radiography Clinic,  
reports as follows :—*

The Mass Radiography Scheme is growing gradually throughout the British Isles, and there are now about 22 Units, either under training or in operation. Notts. County has been promised a set in the near future, so that this area will be adequately equipped in the fight against Pulmonary Tuberculosis, in this respect.

The future tendency is towards Mobile Units, and with this in mind the Ministry of Health has designed a special dark-room van, complete with its own electric generator, so that the X-ray set can be assembled and take X-ray photographs, even in an isolated area, where there is no electricity supply. The Ministry of Health has promised this City one of these vans as a gift in the near future, in addition to the gift of the present Unit. The cost of the van is approximately £3,000.

The past year has been a most successful one for Mass Radiography in this City. For the first time we have had a full team, both clerical and technical, to operate the Unit, and we have succeeded in taking almost 30,000 miniature X-ray films, which is the most we have done in a year up to date.



**Visits to Factories.**

During the year the X-ray Unit and its team paid visits to the Raleigh Cycle Company, the Royal Ordnance Factory, and Messrs. J. B. Lewis and Sons, Ltd., and all of these visits were most successful. I am most indebted to the managements, the Works Medical Officers, and the Factory Liaison Officers and welfare workers, for their generous support and eager co-operation, which resulted in the success of these visits.

**Public Sessions.**

On account of the success of the Public Sessions last year, and in response to further demand for this facility, it was arranged for regular Public Sessions twice a week for six months from 1st October, 1946, to 31st March 1947. Simultaneously a propaganda campaign was set in motion, leaflets were available in shops, facilities for window displays were generously given to us by the leading stores, card-notices were exhibited in 800 buses and trolley buses, 300 specially designed posters were displayed on hoardings throughout the City, and small advertisements appeared in the local Press.

The Sessions during the first three months were well attended, and one week there was a record attendance, when 1,078 miniature X-rays were taken, apart from the full-sized X-ray films.

At the time of writing this report we have had to cease taking miniature X-rays, on account of the fuel crisis. This was a great pity, because a large number of people who were unemployed made enquiries for X-ray, as previously they had not had the time to make use of this facility.

### Foreign Visitors.

It is worth recording that during the past year we have had distinguished visitors from France (Paris), Holland, Czechoslovakia, and Italy. These visits to the Chest Radiography Centre were arranged by the Ministry of Health and through U.N.R.R.A. and were a great success.

The most noteworthy visit was made by a delegation of Czechoslovakian visitors, who were brought by Dr. R. R. Trail, M.D., F.R.C.P., who is also the Consultant Advisor in Chest Diseases to the Czechoslovakian Government.

### STATISTICS.

(From 1st January 1946 to 31st December, 1946).

Total Number of Volunteers	..	..	29,656
Females	..	..	15,620
Males	..	..	14,036
Number of Persons attended for large films (1st appointments)	..	..	3,120 (10·521%)
Number of attendances for serial X-ray observation	..	..	758
Number of X-ray screening cases	..	..	42
Total Number of Large Films taken	..	..	5,381
Number of Clinical examinations & Interviews (excluding non-medical interviews)	..	..	1,367 (4·6095%)
Females	..	..	668
Males	..	..	699
Number of Sputum tests	..	..	1,004
Females	..	..	380
Males	..	..	624

Number of Positive Sputum Cases .. ..	90
Female cases .. ..	37
Male cases .. ..	53
Percentage of Positive Sputum Cases to number of volunteers .. ..	= 0·3034%
Percentage of Positive Sputum Cases to number of sputum tests .. ..	= 8·964%
Total Number of Abnormal Cases (excluding heart cases) .. ..	3,262 (10·999%)
Tuberculous and non-tuberculous.	

**1. Tuberculosis of Lungs (all types) : .. 1,904 (6·420%)**

(a) Healed lesions ..	1,497 (5·048%)
Female cases ..	603 (2·033%)
Male cases ..	894 (3·015%)
(i) Primary Infection ..	1,191 (4·016%)
Female cases ..	488 (1·6455%)
Male cases ..	703 (2·370%)
(ii) Adult Infection ..	306 (1·032%)
Female cases ..	115 (0·388%)
Male cases ..	191 (0·644%)
(b) Active lesions (adult type) ..	135 (0·455%)
Female cases ..	70 (0·236%)
Male cases ..	65 (0·219%)

**Disposal of Active Cases.**

1. Referred to City Tuberculosis Officer ..	111
Female cases ..	62
Male cases ..	49
2. Referred to Tuberculosis Officer <i>via</i> General Practitioner .. ..	3
Female cases ..	1
Male cases ..	2



3.	Referred to County Tuberculosis Officer <i>via</i> General Practitioner	..	..	12
	Female cases	..	4	
	Male cases	..	8	
4.	Referred to City Hospital	..	..	5
	Female cases	..	3	
	Male cases	..	2	
5.	Referred to Leicester Tuberculosis Officer <i>via</i> General Practitioner	..	..	1
	Male case	..	1	
6.	Referred to Derby Tuberculosis Officer <i>via</i> General Practitioner	..	..	1
	Male case	..	1	
7.	Known cases of Tuberculosis	..	..	2
	Male cases	..	2	
(c)	Total number of Observation Cases at Postern Street Clinic	..	..	363
	(i) Observation Cases			
	(1946)	..	272 (0·917%)	
	Female cases	..	147 (0·495%)	
	Male cases	..	125 (0·422%)	
	(ii) Observation cases			
	(1944/45)	..	91	
	Female cases	..	65	
	Male cases	..	26	

<b>2. Non-Tuberculous Condition of Lungs</b>	..	1,358 (4·579%)
Female cases	..	480 (1·618%)
Male cases	..	878 (2·961%)

## DISPOSAL :—

1.	Referred to City Hospital	..	..	35
	Female cases	..	14	
	Male cases	..	21	
2.	Referred to City Hospital <i>via</i> County Authorities	..	..	7
	Female cases	..	6	
	Male case	..	1	

3.	Referred to General Hospital	..	..	1
	Female case	..	1	
4.	Referred to General Hospital <i>via</i> County			
	Authorities	..	..	1
	Female case	..	1	
5.	Referred to Mental Hospital	..	..	1
	Male case	..	1	
6.	Referred to Brompton Hospital <i>via</i> County			
	Authorities	..	..	1
	Male case	..	1	
3.	<b>Selected Heart Cases.</b>	..	..	289
	Female cases	..	159	
	Male cases	..	130	

In the past year 29,656 people volunteered for Mass Radiography (15,620 females and 14,036 males) and of this number ten in every 1,000 volunteers were recalled for a large X-ray film. 5,381 Full-sized films were taken in the year.

### **Pulmonary Tuberculosis.**

1,004 Sputum Tests were made, and ninety cases (8.9%) were found to have the T.B. germ in their phlegm. This means that three persons in every 1,000 volunteers were found to have a positive sputum.

### **Tuberculosis of Lungs.**

With regard to Tuberculosis of the lungs, five persons in a 100 had *healed* tuberculous lesions. and of these, four were due to infection in childhood.

135 persons (70 females and 65 males) were referred to the Tuberculosis Officer for Sanatorium treatment, and of this number 114 were City cases, the remainder being County cases.

### **Abnormal Cases.**

The number of cases found to be abnormal, either tuberculous, non-tuberculous, or selected heart cases, has risen steadily, and this means that the amount of clinical work increases proportionately. Nearly five out of every 100 volunteers for chest X-ray needed a medical examination or medical interview, which, compared with the statistical figures of March 31st 1945, shows that the total number of Abnormal cases has been doubled, that is to say, we are finding more abnormal cases, and this in turn means that the number of clinical examinations has been exactly doubled. A significant point is that between three and four persons out of every 1,000 X-rayed with the miniature film, will need Sanatorium treatment, because of active Pulmonary Tuberculosis, and this figure is a remarkably consistent one.

## **VENEREAL DISEASES.**

*Report by Dr. R. Marinkovitch, Director of the Clinic.*

### **New Cases.**

There were 4,744 new cases dealt with during the year at the Glasshouse Street Clinics. Out of this number 2,278 were found to be suffering from Venereal Diseases, and the remaining 2,466 were found to be suffering from conditions other than venereal. There has been an increase of venereal and non-venereal cases compared with any year since the Clinic opened.



In Table I new cases attending the clinics during the past five years are set out :—

TABLE I.

**New Cases.**

Year.	V.D.	Non.-V.D.	Total.
1942	887	505	1,392
1943	1,114	1,117	2,231
1944	1,182	1,766	2,948
1945	1,371	2,024	3,395
1946	2,278	2,466	4,744

It will be observed that the increase in new cases during the year 1946 is over 100% compared with 1943.

**Venereal Cases.**

The term venereal in this country indicates three diseases, i.e. syphilis, gonorrhœa and soft chancre. There were 2,278 cases of venereal diseases dealt with for the first time during the year under review. Out of this number 1,595 were male patients and 683 were females. In Table II Venereal Cases are set out according to their sexes.

TABLE II.

**Sex Incidence among V.D. Patients during 1946.**

Disease.	Male.	Female.	Total.
Syphilis ..	517	295	812
Gonorrhœa ..	1,050	387	1,437
Soft Chancre ..	28	1	29
TOTAL ..	1,595	683	2,278

**Syphilis.**

In Table III, new cases of syphilis included in the Item 3 of the Annual Return V.D. (R) to the Ministry of Health are analysed.

TABLE III.

**Analysis of New Cases of Syphilis during 1946.**

Stage	Degree.	MALE.	FEMALE.	TOTAL.
ACUTE.	1. Sero-negative primary ..	95	12	107
	2. Sero-positive primary ..	81	67	148
	3. Early Secondary .. ..	39	20	59
	4. Late Secondary .. ..	26	62	88
	TOTAL ACUTE STAGE ..	241	161	402
CHRONIC.	5. Endo-syphilis .. ..	25	47	72
	6. Tertiary and Visceral ..	27	29	56
	7. Neuro-syphilis .. ..	12	5	17
	8. Congenital syphilis ..	13	19	32
	TOTAL CHRONIC STAGE	77	100	177
	GRAND TOTAL ..	318	261	579

It will be seen from Table III that there were 241 male and 161 female patients with acute syphilis, making 402 fresh cases in acute infectious stage. During the year 1945 there were 118 male and 123 female patients making 241 in all. There has been a substantial increase in the incidence of acute syphilis during the year 1946. The increase in both sexes taken together is 66%. In fact during the past 16 years the figures for acute syphilis have never been so high.

The incidence of infectious (acute) syphilis according to the sexes during the 16 years in England and Wales as well as in Nottingham are given in Table IV.

TABLE IV.

**Acute Syphilis.**

Year.	ENGLAND AND WALES.			NOTTINGHAM.		
	Male.	Female.	TOTAL.	Male.	Female.	TOTAL.
1931	6,421	2,683	9,104	90	30	120
1932	6,196	2,532	8,728	112	44	156
1933	5,949	2,141	8,090	134	33	167
1934	4,888	2,030	6,918	94	39	133
1935	4,226	1,745	5,971	59	26	85
1936	4,033	1,642	5,675	45	14	59
1937	3,986	1,647	5,633	35	16	51
1938	3,744	1,494	5,238	28	9	37
1939	3,574	1,412	4,986	31	10	41
1940	4,029	1,582	5,611	26	5	31
1941	5,023	2,309	7,332	21	17	38
1942	5,470	3,576	9,046	34	24	58
1943	5,159	4,483	9,642	53	53	106
1944	4,384	4,934	9,318	68	85	153
1945	5,214	5,527	10,741	118	123	241
1946	—	—	—	241	161	402

**Chronic Syphilis.**

Out of 579 cases of syphilitic infection, 177 cases were in the chronic stage. There is a slight increase in this stage, the figure in 1945 being 122.

**Congenital Syphilis.**

During the year there were 13 male and 19 female patients with congenital syphilis. Out of this number 6 male and 7 female infants were under one year of age.



The remainder were over 5 years of age. Compared with the year 1945 there is a slight increase of congenital syphilis.

### **The Treatment of Syphilis.**

All acute infectious cases are treated with penicillin if they can attend daily for six days. In addition a course of neoarsphenamine and bismuth preparations is given. During the year 207 male patients and 195 female patients were treated with penicillin in oil suspension. Table V illustrates the course of treatment given to patients suffering from acute syphilis.

TABLE V.

### **Treatment of Primary and Secondary Syphilis.**

WEEK.	STABILARSAN.	BIVATOL.	PENICILLIN.
1			2½-3 Mega-Units.
2	0.45 gm. 0.30	0.07 gm. (1c.c.) 0.07	
3	0.45 0.30	0.07 0.07	
4	0.45 0.30	0.07 0.07	
5	0.45 0.30	0.07 0.07	
6	0.45 0.30	0.07 0.07	
7	0.45 0.30	0.07 0.07	
8	0.45 0.30	0.07 0.07	
9	0.45 0.30	0.07 0.07	
TOTAL . .	6.00 gms.	1.12 gms.	2½-3 Mega-Units.

### Gonorrhœa.

During the year there were 1,210 fresh cases of Gonorrhœa dealt with at the Clinics. Out of this number, 828 were Male and 382 were Female patients. Compared with the year 1945 there is a slight increase of Gonorrhœa in the female, but marked increase in the male sex. Demobilisation probably explains this state of affairs. All these patients were treated with Penicillin in Oil, and a certain number of them were given Sulphathiazole treatment in addition to Penicillin.

### Soft Chancre.

There were 28 patients with this condition. This is a slight increase in the disease, but it has no significance and is probably due to the greater care in the classification and diagnosis of non-syphilitic lesions of the genital organs.

### Intolerance to Neoarsphenamine Treatment.

In Table VI the incidence of Dermatitis and Jaundice is shown :—

TABLE VI.

Year.	Number of Syphilis patients attending.	Number of patients developing Jaundice.	Number of patients developing Dermatitis.
1943	840	7 (0·8%)	3 (0·4%)
1944	1,138	16 (1·4%)	2 (0·1%)
1945	1,236	21 (1·7%)	4 (0·3%)
1946	1,794	7 (0·3%)	3 (0·1%)

**Defaulters.**

In Table VII, defaulters are analysed according to the sex, and the figures are given for the past four years. It will be seen that the general defaulters rate for the year 1946 was 6·4%. This is a great credit to the Staff of the Clinics.

TABLE VII.

**Defaulters.**

Year.	Number of V.D. Cases attending.			Number of Patients ceased to attend.				Total Defaulters.	
	Males	Females	Total	Males Number	%	Females Number	%	Number	%
1943	1,173	683	1,856	83	7·1	44	6·4	127	6·8
1944	1,377	1,135	2,512	156	11·3	64	5·6	220	8·7
1945	1,288	1,167	2,455	111	8·6	52	4·4	163	6·6
1946	2,267	1,405	3,672	180	7·9	57	4·1	237	6·4

**Regulation 33B.**

The following is a short report of work done under regulation 33B from 1st January to 31st December, 1946. The number of Forms 1 received showed marked decrease from last year, and the number of patients found and examined has decreased.

		Male.	Female.
1.	(a) Total number of contacts in respect of whom Form 1 was received ..	1	70
	(b) Number in (a) transferred from other areas .. .. .	—	1



				Male.	Female.
2.	Number of cases in 1 in which attempts were made outside the scope of regulation to persuade the contact to be examined before the latter has been named on a second Form 1 .. .. .			1	34
	Contacts found .. .. .			1	31
	Contacts examined or already under treatment .. .. .			1	40
3.	(a) Number of those in 1 in respect of whom two or more Forms 1 were received.. .. .			—	13
	(b) Number included in 3(a) in respect of whom the first Form 1 was previously reported under 1 .. .. .			—	7
	(c) Number included in (3) (a) transferred from other areas .. .. .			—	1
4.	Number of those in (3) (a) who were :—				
	(a) Found .. .. .			—	11
	(b) Examined after persuasion .. .. .			—	10
	(c) Served with Form 2 .. .. .			—	8
	(d) Examined after service of Form 2 .. .. .			—	8
	(e) Prosecuted for failure :—				
	(1) To attend for and submit to medical examination .. .. .			—	1
	(2) To submit to and continue treatment .. .. .			—	2
	(f) Transferred to other areas .. .. .			—	1

**Lectures on Sex and Venereal Diseases by arrangement with the  
Central Council for Health Education.**

	Date.	Lecturer.	Audience.	Number present.
1	17.2.46	Dr. R. Marinkovitch.	Industrial Nurses Conference in Nottingham.	50
2	6.5.46	do.	Nursing Staff, Isolation Hospital, Nottingham.	20
3	10.10.46	do.	Baldwin's Boys' Club.	45
4	17.10.46	do.	do.	50
5	30.10.46	do.	do.	40
6	30.10.46	Mr. Tuchler.	Hyson Green Youth Club.	70
7	6.11.46	do.	do.	70
8	13.11.46	do.	do.	70
9	8.12.46	do.	Nottingham Jewish Club.	20
10	19.9.46	Mrs. Brook	Aspley Women's Guild.	25
11	10.10.46	do.	do.	25
12	7.11.46	do.	do.	25
13	13.9.46	do.	Bryanston House School.	35
14	20.9.46	do.	do.	35
15	27.9.46	do.	do.	35
16	1.10.46	do.	Woolworth's Store, Nottingham.	45
17	8.10.46	do.	do.	60
18	15.10.46	do.	do.	45
19	11.9.46	do.	Women Co-operators.	60
20	31.10.46	Dr. P. Heath	Stevens & Pedley's Factory.	50
21	9.9.46	do.	National Association of Girls' Clubs.	12
22	16.9.46	do.	do.	12
23	23.9.46	do.	do.	12
24	10.11.46	do.	Nottingham Jewish Youth Club.	50
25	24.11.46	do.	do.	50
26	8.12.46	do.	do.	50

**CANCER.**

In the last Annual Report it was recorded that the preparation of a scheme under the Cancer Act had been considerably affected by the fact that in the plans for a National Health Service the local authorities will no

longer have the same responsibilities for dealing with Cancer as were originally put upon them by the Cancer Act. The scheme which was being worked upon at the time envisaged the incorporation of the Nottingham facilities for the diagnosis and treatment of Cancer into a large organization based on Sheffield as centre, and covering a large area of the East Midlands and South Yorkshire.

Although the formation of a statutory joint committee for this purpose has been abandoned, the City Council and the County Council have continued to co-operate with the Joint Committee of the Cancer Campaign and the General Hospital to formulate schemes, which have proved acceptable to the Ministry of Health. Under these schemes the special work being carried out at the Radiotherapeutic Department at the General Hospital is to a considerable extent being financed by City and County, and it is all linked up with Sheffield, just as was intended in the earlier proposals.

When the time comes, in 1948, to hand over the responsibility to the Regional Hospital Board, set up under the National Health Services Act 1946, it will be with considerable pride that we can point to an organization providing up-to-date facilities for dealing with Cancer, begun many years ago by the Cancer Campaign, by voluntary effort, and latterly supported by the City and County authorities.

In the meantime the work proceeds on very sound lines. The following figures are extracted from the report of the Radiotherapeutic Centre :—



## Nottingham and Notts. Radiotherapeutic Centre.

### Out-Patient Clinics.

	1944.	1945.	1946.
New patients .. ..	681	1,380	1,521
Follow-up Examinations .. ..	2,967	3,888	4,701
Total Patients seen .. ..	3,648	5,268	6,222

### Treatment Table.

	1944.	1945.	1946.
Radium Treatments and Operations ..	245	353	384
<i>Deep Therapy.</i>			
Attendances .. ..	?	3,475	5,143
Exposures .. ..	?	6,707	9,482
<i>Superficial Therapy.</i>			
Attendances .. ..	?	1,562	2,018
Exposures .. ..	?	3,702	5,100
Totals : Attendances .. ..	?	5,037	7,261
Exposures .. ..	6,697	10,409	14,582
Mould Room Preparations ..	—	127	162

### ULTRA-VIOLET RAY CLINIC.

The Health Department continues to provide treatment by ultra-violet and infra-red rays to persons for whom either of these courses has been prescribed by medical advisers.

The treatment is administered under medical supervision. Paying patients are accepted from City and County ; poor persons resident in the City are treated free, or at reduced rates.

The following statistics refer to 1946 :—

Total number of patients treated—

Males	..	..	..	..	245	
Females	..	..	..	..	361	
					—	606

Total number of treatments administered .. 9,025

Number of paying patients—

(a) City	..	..	..	238	
(b) County	..	..	..	39	
				—	277

Free Patients .. .. 329

### **CITY BACTERIOLOGICAL LABORATORY.**

Bacteriological work necessary for the diagnosis and prevention of infectious disease and for the recognition of organisms of food poisoning, together with kindred work, has for many years been carried on at the City Bacteriological Laboratory in Cumberland Place. These premises are owned by the General Hospital.

Early in the war, the Ministry of Health arranged for a National Public Health Laboratory service to be established, so that the whole country could be adequately provided with services of this nature. This national service, with its numerous laboratories scattered over the country, is to be maintained on a permanent footing. During 1946 the Health Committee was invited to consider handing over its laboratory organization to the National Public Health Laboratory Service.

In view of the fact that the provision of better accommodation is long overdue, the offer proved tempting, as it included a promise to build entirely new premises in the City Hospital grounds. The new service would have an advantage over the old, in that the pathologist would

not be working in comparative isolation, but would be one of a national team, among whom there would be free interchange of ideas, with possibilities of sending work requiring highly specialized knowledge of any particular branch of the subject to some laboratory which had special facilities for it.

The offer was, therefore, accepted, and as soon as the Government can get the new laboratory built the old buildings will be vacated, and the staff and equipment will be transferred to the National Public Health Laboratory Service. This will reduce the responsibilities of the Health Committee, while the bacteriological facilities available to the City, will be improved rather than restricted, probably with monetary saving. The changeover is expected to take place early in 1948.

*Dr. E. J. Storer gives the following summary of Examinations carried out at the City Laboratory from January 1st to December 31st, 1946.*

During the year 33,206 specimens have been examined by the staff of the City Laboratory, as compared with 29,126 in 1945.

For the purpose of comparison the figures of the past three years are set out :—

1. Examinations in connection with Venereal Diseases :—

1944.	1945.	1946.
12,386	16,953	23,781

2. Examinations under Public Health Acts :—

1944.	1945.	1946.
10,452	11,892	9,158

3. Clinical Pathological Work :—

1944.	1945.	1946.
186	281	267



### 1. Examination of specimens in connection with Venereal Diseases.

During the past year 23,781 examinations have been carried out at the City Laboratory.

The specimens have been derived from the following sources :—

(a)	City V.D. Clinic (all cases)	..	..	..	13,717
	(R.A.F. 545 ; Army 132 ; Royal Navy 49).				
(b)	City Hospitals and Institutions	..	..	..	7,213
(c)	City Medical Practitioners	..	..	..	771
(d)	County V.D. Clinics	..	..	..	859
(e)	County Hospitals and Institutions	..	..	..	731
(f)	County Medical Practitioners	..	..	..	490

### 2. Examinations in accordance with various Public Health Acts.

These numbered 9,158 as compared with 11,892 in 1945 and 10,452 in 1944.

The number of swabs examined for diphtheria was 4,154 of which 151 were positive.

Examinations of sputa for tubercle bacilli numbered 3,339 of which 713 were positive.

Public Health Work was derived from the following sources :—

(a)	City Institutions and Hospitals	..	..	..	4,606
(b)	City Medical Practitioners	..	..	..	1,466
(c)	County Health Department	..	..	..	995
(d)	County Hospitals	..	..	..	628
(e)	County Medical Practitioners	..	..	..	1,463

### 3. Clinical Pathological Work.

During the past year 267 specimens were examined.

### CERTIFICATION FOR CREMATION.

The Medical Officer of Health and his Deputy act as medical referees to the Wilford Hill Crematorium, and

cremation cannot take place until one of them has examined the documents presented and has issued the appropriate certificate.

Cremation is increasingly accepted as a means of disposal of the dead, as is shown by the fact that in 1946 the referees issued 1,029 certificates, compared with 694 in 1944 and 833 in 1945.

The fees for this work are paid to the Health Committee and not to the officers.

#### **PUBLIC MORTUARIES.**

The public mortuaries of the City are situated near the police stations at Leen Side and Gregory Boulevard.

Leen Side Mortuary is equipped with refrigerating apparatus, and the mortuary at Hyson Green is now practically out of use. The building, however, is kept ready for use in case of emergency.

In 1946 Leen Side was used for 254 bodies and the number of post-mortem examinations was 243.

#### **CARE OF THE BLIND.**

The arrangements for the care of the blind, including the Prevention of Blindness Scheme, continue to operate as described in previous Annual Reports, except for variations in certain allowances.

The blind persons on the city register at 31/12/46 are classified as follows :—

Blind Trainees (maintained by Education Committee) ..	6
Blind Workshop Employees, including blind persons on the staff of the Institution .. .. .	57
Home Workers .. .. .	6
Unemployable blind receiving assistance .. ..	261
Blind persons not in receipt of any form of financial help from the City Council .. .. .	194
Blind Home Teachers .. .. .	2
School children .. .. .	8
	<hr/>
	534
	<hr/>

The cost of these services for the year ended 31/3/47 stands at £23,732.

#### **Prevention of Blindness Scheme.**

Thirty-one cases have been referred to the scheme for the prevention of blindness and many are still under treatment from previous years.

Expenditure during the year amounted to £376, and patients' contributions to £27.

Cases referred in 1946 can be grouped as follows :—

Cataract extraction.. .. .	18
Iridectomy and needling only .. .. .	1
Detached retina .. .. .	1
Contact lenses .. .. .	1
Artificial eye (1 adult and 1 pre-school child) ..	2
Special case for glasses .. .. .	1
Patient for Vale Brook Lodge .. .. .	1
Unsuitable or refused treatment .. .. .	6
	<hr/>
	31
	<hr/>



**ACKNOWLEDGMENT.**

I desire to acknowledge the excellent work done by the staffs of all branches of the Health Department in a year when the conditions were far from easy, and when so many were carrying out their duties at high pressure.

I also desire to record once more the excellent relations which exist between the Health Committee and its many servants, a circumstance which is very satisfactory.

CYRIL BANKS,  
*Medical Officer of Health.*

HEALTH DEPARTMENT,  
HUNTINGDON STREET,  
NOTTINGHAM.  
*August, 1947.*

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